

# EFFECT OF INTERVENTION STRATEGIES ON SELF PERCEPTION AND ADJUSTMENT OF SOCIAL ISOLATES



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## **CERTIFICATE**

This is to certify that the thesis entitled "**EFFECT OF INTERVENTION STRATEGIES ON SELF PERCEPTION AND ADJUSTMENT OF SOCIAL ISOLATES"** submitted by **Mrs. M.V.L. SADHANI** for the degree of Doctor of Philosophy in Human Development and Family Studies of Sri Padmavathi Mahila Viswavidyalayam, Tirupati is a record of original research work done by her, during the period of her study in this University under my supervision and that this thesis has not previously formed the basis for the award to her of any Degree or Diploma or Fellowship or Associateship or other similar title.

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## *Chapter - I*

# INTRODUCTION

## INTRODUCTION

*"We judge ourselves by what we feel capable of doing,  
while other judges us by what we have already done".*

- Longfellow

Sociometric status or the position, the person has in a group is persistent, although it may vary from one group to another. This means that the popular tend to remain popular, the disliked continue to be disliked, no matter how long they are associated with the group (**Emmerich, 1966**).

In every day speech, it is usual to refer to a child who achieves social acceptance as 'popular'. Social acceptance means being chosen as a companion for an activity in a group of which one is a member. It is an index of the success with which children take their place in the social group and the extent to which other group members like to work or play with them.

Social acceptance, or popularity, ranges from very high, as in the case of the star whom almost everyone likes and wants to claim as a friend, to very low, as in the case of the social isolate whom no one claims as a friend. It is just as unusual for a person to be liked by everyone as it is for a person to be rejected by everyone.

One of the chief factors contributing to persistence of sociometric status is the person's interest and attitude toward social participation. If the individual wants to be accepted, he will be motivated to develop socially approved traits and modes of behaviour.

The more popular the person, the higher his level of social participation. Those whose popularity is high generally dominate the activities of the group and its membership (**Sugarman, 1968**). Social participation provides opportunities to improve social skills that contribute to even greater acceptance. One of the most important social skills the popular person has an opportunity to learn is social insight, or the ability to put oneself in the "Psychological shoes" of another and perceive things from his frame of reference. Those who are least popular are least accurate in their judgments of others with the result that they frequently say and do things to make others dislike them (**Jahoda, 1959**).

Early adolescence extends roughly from thirteen to sixteen years. It is usually referred to as the "teens", sometimes even the "terrible teens" (**Majeres, 1976**). Adolescence is a period of transition when an individual changes physically and psychologically from a child to an adult (**Hurlock, 1981**). The most important developmental task of adolescence, according to **Erikson (1968)**, is the search for and the achievement of a sense of identity. Becoming independent of parents and gaining acceptance of peers are important steps in achieving a sense of personal identity.

The importance of self-acceptance in adolescence has been stressed by **Jersild (1963)**, "The adolescent who realistically accepts himself has a treasure within his own world, the one with meagre talents who forthrightly appreciates what he has is richer than the one who is bountifully endowed but deplores himself".

As a general rule, the more self-accepting the person, the more likely he is to be accepted by others. However, it must be remembered that many other factors enter into social acceptance. The social group expects every person who belongs or wants to belong to the group to conform to its standards. It judges him according to his ability to come up to these expectations, decides whether to accept or reject him, and, if accepted, how much acceptance to grant him (**Levine and Sussmann, 1960**).

Self-perception develops gradually, through social learning process, particularly through role learning and identification. This is a process that is accentuated and hastened as the individual becomes increasingly involved with other children. From what others say or seem to him to be saying about him, what others do or seem to be doing to show that he is valued or not valued - from such inter-personal relationships the individual develops the picture he has of himself. Something that we may call experience of the evidence that he is loved and admired by his parents and favourably by his peers contributes to a picture he gets of himself as a desirable person. On the otherhand, experience of being rejected and neglected by his parents, of being indifferently regarded by his peers, or of being overlooked, often criticized or even ridiculed - by his teacher, lead to a self-picture with which the individual finds it hard to live (**Suresh, 1998**).

People feel better about themselves when they accept their personal strengths and weaknesses. This positive attitude is reflected in their behaviour and demeanor and results in positive feedback from others. Moreover, people are more likely to accept others' strengths and weaknesses

when they have accepted their own. Self-acceptance does not necessarily assure acceptance of others, but it does contribute to it. If a person truly accept the fact that he/she is poor at a particular activity, and is less likely to negatively evaluate some one else who is equally poor at the same activity (**Johnson, 1990**).

According to **Hurlock (1976)** one outstanding characteristic of every unpopular person is that he has a poor self-perception and suffers from feelings of insecurity and inferiority which stem from the belief that he makes a failure of whatever he undertakes.

Lack of self-understanding may come from stupidity or ignorance; it may come from lack of opportunities for self-discovery; or it may come from the person's desire to see himself only as he would like to be, not as he actually is. If the person is blind to what he does not want to see, he is engaging in self-deception to cloak what he does see so that it will be to his liking (**Hurlock, 1976**).

The term 'adjustment' refers to the extent to which an individual's personality functions efficiently in the world of people. Well-adjusted children enjoy a kind of inner harmony, in the sense that they are satisfied with themselves.

One of the most difficult developmental tasks of adolescence relates to social adjustments. To achieve the goal of adult patterns of socialization, the adolescent must make many new adjustments, the most important - and, in

many respects, the most difficult - of which are those to the increased influence of the peer group, changes in social behaviour, new social groupings, new values in friendship selection, new values in social acceptance and rejection, and new values in the selection of leaders (**Greenberger et al., 1975**).

Acceptance of self is accompanied by acceptance to others. The self-accepting person feels secure enough to take an interest in others and to show empathy - the ability to transpose himself into the thinking, feeling, and acting of another. As a result, he makes better social adjustments, than the person who is self - oriented because of feelings of inadequacy and inferiority.

The person who makes good personal adjustments will be happy and successful. The one who makes good social adjustments will be popular, will enjoy social contacts, and will have a full and rich life.

Because of the psychological damage of persistent lack of social acceptance, clinicians and educators are now trying to find ways to help children who are experiencing such difficulties. Studies show that when a person can be helped to acquire social skills and competence in activities favoured by the group, he will be better accepted.

Social isolation leads to the development of personality traits that adversely affect the person's future social adjustments as well as his self - perception. (**Hurlock, 1986**). Good peer relations are necessary for normal social development in adolescence. Social isolates report being socially

dissatisfied and lonely (**Asher, Hymel and Renshaw, 1984**). Social isolation is linked with many different forms of problems and disturbances, ranging from delinquency and problem drinking to depression. (**Cairns and Cairns, 1989; Dishion and Skinner, 1989**). Adolescent social isolates seem to be particularly vulnerable to problems and disturbances in late adolescence and adulthood. This likely happens because they miss out on a considerable amount of socialization that only comes through association with peers (**Hill, 1980**). In one investigation (**Roff, Sells and Golden, 1972**) very poor peer relations in childhood were linked with abnormal development in late adolescence and youth including a tendency to dropout of school and engage in antisocial behaviours (**Santrock, 1990**).

As **Bretsch (1952)** writes one avenue of promoting better adjustment on the part of adolescents is that of teaching them social skills which will enable them to function effectively in social situation. Other effective avenues include the correction of annoying mannerisms that create an unfavourable impression, acquisition of pattern of behaviours that are admired by others, conformity to social expectation, learning to look and act in a sex appropriate way and development of greater social and self insight (**Hurlock, 1986**).

Peer group may play an important role in modifying social isolate's behaviour. Peer reinforcement in the form of attention and approval affects the behaviour patterns of the peer recipient. Numerous studies (**Furman and Masters, 1980; Wahler, 1967**) have documented that when peers are instructed to attend only a certain behaviour of a classmate (eg. helpful, co-operative ones) and to ignore other behaviours (eg. nasty, aggressive ones) significant behavioural change can be produced.

Peer influence each other by serving not only as reinforcers but also as social models. Children acquire a wide range of knowledge and a variety of response by observing the behaviour of their peers. Children may learn new social skills through imitation since they tend to imitate the dominant and presumably socially skilled member of the group (**Grusec and Abramouitch, 1982**).

Parents play an important role in facilitating social skills. They serve as partners with whom the child may acquire skills that help him/her successfully interact with other children. Parents play an important role as social arrangers. Parents facilitate their childrens' peer contacts by scheduling visits between friends, enrolling children in organized activities and taking them to social gatherings. Parents provide models of social relationships. Children see how their parents interact with other people and through these observations may learn the rules of social friendship. In addition parents can serve as coaches, they can give advice, support and directions about the most helpful and successful strategies for their childrens' conduct with their peers.

Another major force in the life of the adolescent is the school. The most important figures in the school are the teachers. Teachers influence children through the process of reinforcement and modeling. Teachers reward conforming and socially acceptable behaviour and generally punish disruptive and aggressive behaviour and they also serve as models.

Social acceptance is related to good academic achievement while social isolation is related to poor achievement. According to **Sugarmen (1968)** social isolates have negative attitudes towards their work and school. This as **Havighurst and Neugarten (1957)** observed may be not only for lack of academic ability but failure to meet the school's requirements. So any programme designed for intervention of social isolates should also include academic aspects.

Due to the advantageous influence of peers, parents and teachers on the socialization of social isolates as stated above, peer oriented, parent oriented and teacher oriented intervention strategies were planned and implemented on social isolates.

Planning and implementation of intervention strategies for social isolates for improvement of self-perception and adjustment is the prime objective of the present investigation.

Keeping the above aspects in mind, this research was planned and conducted with the following Objectives :

- To assess self-perception of sociometric stars, average chosen, and social isolates.
- To assess adjustment of sociometric stars, average chosen, and social isolates.
- To plan and implement intervention strategies for social isolates.
- To compare the scores of sociometric stars, average chosen and social isolates on self-perception for scores obtained before and after implementation of intervention.

- To compare the scores of sociometric stars, average chosen and social isolates on adjustment for scores obtained before and after implementation of intervention.
- To find out the impact of intervention strategies on self-perception and adjustment of social isolates.

## **HYPOTHESES**

The following Hypotheses are proposed for testing in the present study.

- Self-perception of social isolates would be significantly lower than average chosen and sociometric stars.
- Adjustment of social isolates would be significantly lower than average chosen and sociometric stars.
- There would be significant difference between pre test and post test scores of social isolates on self-perception.
- There would be significant difference between pre test and post test scores of social isolates on adjustment.
- There would be no significant difference between pre test and post test scores of average chosen and sociometric stars on self-perception.
- There would be no significant difference between pre test and post test scores of average chosen and sociometric stars on adjustment.
- In post test after intervention the peer, parent, teacher and peer-parent-teacher oriented groups of social isolates would not differ significantly in self-perception.
- In post test after intervention the peer, parent, teacher and peer-parent-teacher oriented groups of social isolates would not differ significantly in adjustment.

## *Chapter - 2*

# REVIEW OF RELEVANT LITERATURE

## **REVIEW OF LITERATURE**

The literature relevant to the present study has been reviewed in this chapter. Investigators have studied various aspects of sociometric status and its influence on self-perception and adjustment of adolescents. In this chapter, an attempt was made to report the findings of different research investigations. The studies were presented under the following headings.

- 2.1 Methods of Identifying Sociometric Status Groups
- 2.2 Characteristics of Different Sociometric Status Groups
- 2.3 Sociometric Status and Self-Perception
- 2.4 Sociometric Status and Adjustment
- 2.5 Intervention Strategies for Improving Social Skills of Social Isolates

### **2.1 METHODS OF IDENTIFYING SOCIO METRIC STATUS GROUPS**

Some of the studies relating to the methods of identifying sociometric status groups by different investigators were given below.

**Frankel and Potashin (1944)** have found that *sociometry* is generally adequate for identifying friends as a precursor to exploring behavioural differences between friends and non-friends, and it is a tribute to the validity and robustness of the method that such relatively stable findings have emerged. Admittedly, much depends upon the age of the children. The method is substantially less reliable when applied to children under the age of 5 or 6 years than when applied to children older than this age.

**Roff, Sells and Golden (1972)**, in their report of a large study of social adjustment in children - in which they employed sociometric measures - concluded for various reasons, that the use of complex matrix methods was unnecessary. It seems likely, however, that more refined indices such as *clique measures* do identify something about the structure of social groups that is distinct from a simple popularity index based upon sociometric nominations. This is illustrated well by correlations between clique membership scores and popularity nominations.

**Patricia et al. (1973)** conducted a study on a total of 607 students in grades four through eight who responded to a sociometric questionnaire. These responses were analyzed by obtaining test-retest correlations for *choices given, choices received, and reciprocal choices*. The results indicate that reciprocal choices are less affected by age and time changes than all other ways of interpreting sociometric data.

Third and fifth grade children were given three *sociometric measures* and were later individually *interviewed* by **Ladd and Oden (1979)** on two occasions in response to three cartoon themes showing a child being teased by peers, being yelled at by a peer, and having a school work problem. In both interviews, children responded to cartoons depicting peer group and dyad contexts. On separate interview occasions, children suggested helpful behaviours from the role of a 'helper' and 'helpee' (child in need of help). After each interview, children nominated helpful classmates for each situation. Multiple regression analyses indicated that higher uniqueness scores were significant predictors of low sociometric ratings from classmates.

**Roistacher (1974)** administered a *sociometric instrument* to 1,204 junior high school males, together with *7-point scales* on which they could indicate how well they liked each of their peers, and how similar to themselves they perceived their peers to be. Well liked boys received the same number of sociometric choices as others, but had a higher proportion of their choices reciprocated.

*Positive and negative nomination* as well as *rating scale* sociometric measures were administered by **Hayvren and Hymel (1984)** individually to children. *Behavioural observations* of peer interaction were conducted in the weeks before and after sociometric testing as well as during the 10 minutes immediately following testing. Behaviour was recorded in terms of the initiator and recipient of the interaction as well as the affective quality of the initiation and response. Results indicated that although children made more positive initiations and responses to most preferred peers than to least preferred peers, they did not differ in the frequency of negative initiations or responses made to most versus least - preferred peers as a function of sociometric testing.

**Bukowski and Newcomb (1985)** undertook a study on 480 children nominated three *same sex children as best friends* and three *same sex children as least liked* peers and rated each of their *same sex peers on eight social roles* and a *liking scale*. On the basis of the sociometric nominations, children were

identified as being of popular, average, neglected, rejected, or controversial sociometric status. The eight social roles were grouped to form three clusters labeled aggression, prosociability, and withdrawal. Consistent with their sociometric classification, controversial sociometric group children evidenced higher variability scores on the liking ratings and on the withdrawal and prosociability clusters.

Childrens' conflicts with one another during free play were *observed* by **Shantz (1986)** to determine the relation between a child's rate of conflict participation and his or her rate of aggressive behaviour during conflict episodes, and between these variables and the degree to which the child was liked or disliked by peers. Four adhoc play groups of 12 boys and 4 groups of 12 girls were formed. Each group included an equal number of first and second graders, and was observed for 10, one hour play sessions. *Sociometric interviews* were conducted both before and after the set of 10 play sessions. Rate of conflict participation was positively related both to the percentage and to the frequency of both types of aggression over the entire session.

From the review of above studies, it was evident that clique measures would identify the structure of social groups that is distinct from a simple popularity index based upon sociometric nominations. Reciprocal choices were less affected by age and time changes than choices given and choices received. Children make more positive initiations and responses to most preferred peers than to least preferred peers. Rating scale and liking scale were also frequently used sociometric measures. The information collected by sociometric measures was supplemented by sociometric observations and sociometric interviews.

## **2.2 CHARACTERISTICS OF DIFFERENT SOCIOMETRIC STATUS GROUPS**

Popularity in the peer group has been linked to several character traits. Well accepted and popular children are usually those who participate in a large number of activities and can perform most skills at an average or above-average level. Additional factors related to popularity are cooperation and friendliness toward others, physical appearance and intelligence. Youngsters who are rejected or unpopular frequently may face negative consequences. Some evidences by various investigators were given below.

**Northway and Wigdor (1947)** have compared Rorschach responses of three groups of 8th grade boys and girls who were high, low and middle in sociometric status. The authors indicated that those *high in status* were characterized by *greater sensitivity* in sensing the feelings of others, and a *conscious striving* for the approval of others. Subjects in the *middle group* were *more shallow, less introspective* group with *few anxiety or emotional disturbances*. The *low group* seems to be the most *seriously disturbed*. They show *less ability to control their emotions*, and seem to be a *more egocentric, moody and impulsive group*.

In the study of 50 high school students and their parents, **Norman (1953)** obtained self-concept measures for each member of the family and sociometric data were collected for the children. The author reported a significant positive correlation between sociometric status and *self insight*. Insight was defined in terms of correspondence between self ratings and

ratings by peers and also correspondence between self ratings and ratings by experienced clinicians. It was found that for boys, sociometric status was positively related to similarity to father. For girls, however, similarity to mother was unrelated to number of sociometric choices received.

**Marks (1954)** administered an interest test and a sociometric questionnaire to 730 students in grades 8 to 12. He then compared the 302 students who were at the unacceptable and acceptable ends of the sociometric dimension. A number of differences were found between these two groups in terms of interest patterns: In general the acceptable adolescent is seen as *sociable, involved with people*, and relatively *impulsive*. It appeared that *mechanical interests* for boys and *intellectual interests* for girls may act both to isolate and to compensate for isolation.

**Terner and Vanderlippe (1958)** used Q-sort items to measure self concept, and ideal self in a group of 175 undergraduates. From this sample, the 25 with the greatest and the 25 with the smallest self-ideal discrepancy were selected for comparison on a number of variables, including sociometric status in their living groups. Those with the *highest discrepancy* were less well liked than those with the least discrepancy.

By establishing which children are chosen most often and least often, researchers correlate acceptance with other factors. Popular children tend to be *healthy and vigorous, well poised, and capable of initiative*; but they are also *adaptable and conforming*. They are *dependable, affectionate, considerate* and *original thinkers (Reese, 1961)*.

**Gottman et al. (1975)** undertook a study on 198 children in middle and low income schools. The relationships between number of friends, socioeconomic status, and grade level were studied in a 2 x 2 x 2 factorial design with 2 sets of dependent measures: 1. Social skills were assessed by an experimenter testing each child individually on a set of tasks which included measures of the ability to label emotions in facial expressions, knowledge of how to make friends, giving help and role taking ability, and 2. Social interaction in the classroom was assessed using a naturalistic observational system. Popular and unpopular children differed in their knowledge of *how to make friends* and on the *referential communication task*. In the classroom, popular children distributed and *received more positive reinforcement* than unpopular children and *spent less time day dreaming*.

**Gottman, Gonso and Rasmussen (1975)** and **Ladd (1983)** shown that popular and average status children engage in more *cooperative play* and *social conversation* than do rejected children. Rejected children show many more *inappropriate behaviours* than any of the other status groups. Often alone they *wander around the room* and are *off-task during the work period*. They are also *more aggressive, argumentative* and likely to *engage in disruptive peer interactions*.

**Olweus's (1978)** research on children who are the *victims of peer bullying* suggests that this characteristic in particular is related to low peer status. He has found that frequently victimized young adolescents receive relatively few positive sociometric nominations. The rejected young adolescents would include individuals who were *highly submissive* and *easily pushed around*, as well as individuals who were *highly aggressive*.

Positive characteristics such as *cooperativeness* and *supportiveness* have been found to be correlated with both liking and dislike, whereas negative behaviours such as *aggressiveness* or *disruptiveness* have been found to be correlated only with dislike. This pattern of correlations suggested that students who exhibited high levels of negative behaviour and low levels of positive behaviour would be rejected, since these students would receive few positive and many negative sociometric nominations. At the same time it suggested that students with high level of negative behaviour who also exhibited high rates of positive behaviour would receive positive as well as negative nominations and therefore would not be rejected (**Coie, Dodge and Coppotelli, 1982**).

Neglected children *spend more time alone* and *make fewer social contacts*. When they do attempt to make a social contact, they are often *ignored*. They are characterized as being neither aggressive nor disruptive and have *difficulty in integrating with peers*. They engage in *more solitary activities* than other children (**Dodge, Coie and Brakke, 1982**).

**Dodge and Frame (1982)** have shown that rejected children are likely to show *biased processing of social cues* about the behaviour of others.

**Coie and Kupersmidt (1983)** observed fourth grade, poor, black boys, some of whom knew each other, some of whom did not, as they played and worked together. They found that distinctive behaviour patterns quickly emerged for boys of popular, rejected, and neglected status. Popular boys

were *rarely aggressive* and almost exclusively *set the rules* and *provided suggestions* in difficult or ambiguous situations. They were seldom targets of other's aggression and were therefore less likely to be provoked to act aggressively or inappropriately. Neglected boys were the *least interactive* and *aggressive*. Rejected boys were *talkative, active*, and *aggressive*, and they were less likely than others to keep working or playing with the group during structured activities.

In one study of *social skills and status*, **Dodge (1983)** watched how previously unacquainted boys found their status within a newly formed peer group. Unpopular boys *acted inappropriately, disrupted ongoing play*, and *spent a good deal of time playing alone*. They were *inept* or *aggressive* and *engaged in little cooperative play and social conversation*. Popular boys were *physically attractive, often cooperative, rarely aggressive or inappropriate* in their actions. When they approached others, they were usually well received and interacted for relatively long periods of time. Other boys considered them *good leaders and good sharers*. "Controversial" boys who were liked by some children and disliked by others - acted more cooperatively and engaged in more social talk than the popular boys; they were socially skilled; but often they were also hostile or aggressive.

**Finn (1984)** reported that although peers were more likely to nominate rejected children to fit the descriptions '*angry*' and '*unhappy*', rejected children did not report themselves to be any more angry or unhappy than other children. These findings suggest the possibility that rejected individual's self-concepts may be less closely related to objective assessments than those of other individuals.

**Rubin** (1985) and **Rubin et al.** (1990) have proposed two behaviourally distinct subgroups of children at risk for rejection, one composed of aggressive and disruptive children and the other of children who don't act out, but instead are characterized by *extreme social unassertiveness* and *low social interaction*, a pattern that **Rubin** calls social withdrawal. **Rubin** has portrayed this latter group of children as *avoiding confrontations*, as making few and *highly deferential requests*, and as being '*easy marks*'. **Rubin** has proposed that this pattern does not lead to rejection in the early elementary school years but does lead to rejection in the later years.

**Ladd and Price** (1986) have reported that some children *over or underestimate their own cognitive or social competence*, but they did not distinguish between rejected and neglected children.

**French and Waas** (1988) obtained teacher ratings on popular, rejected and neglected second and fifth grade children. Rejected children were characterized as *aggressive, hostile* and *task avoidant*, while neglected children were described as having more *school behaviour problems* than popular children.

Study reported by **Asher et al.** (1990) showed that both *loneliness* and *social anxiety* are likely to be elevated among individuals who are low in peer acceptance, especially among rejected children.

*Behavioural analysis* by **Newcomb et al.** (1991) showed that popular childrens' array of competencies makes them likely recipients of positive peer nominations, whereas *high levels of aggression* and *withdrawal* and *low levels of sociability* and *cognitive abilities* are associated with rejected peer status.

A consistent profile marked by less sociability and aggression emerged for neglected status. Controversial children had higher aggressive behaviour than rejected children but compensated for it with significantly better cognitive and social abilities.

The research designed by **Jennifer and Steven (1992)** identified patterns of *behaviour and emotional response* associated with peer rejection in early adolescence. Seventh and eighth grade middle school students were administered positive and negative sociometric nominations, peer behavioural assessment items, a loneliness and social dissatisfaction questionnaire, and a newly developed interpersonal concerns questionnaire. Results indicated that most rejected students were *aggressive or submissive*, but it was the combination of aggressiveness or submissiveness with *low levels of prosocial behaviour* that was associated with peer rejection. With regard to students' affective experiences, submissive rejected students, when compared with average status students, were found to report higher levels of *loneliness* and *worry* about their relations with others.

**Patricia and Karen (1992)** examined the extent to which isolated and aggressive sixth graders compensate for unsatisfying *school friendships* by deriving *support from siblings* and nonschool friends and whether this support protects such children from poor socio-emotional outcomes. Results were as follows : a) when compared with average and aggressive children, isolated children perceived their school friendships as least supportive and

their favourite sibling relationships as most supportive, b) isolated, aggressive, and average children did not differ in their perceptions of support from nonschool friends, and c) high support from a favourite sibling was associated with better adjustment among isolated children on select outcomes.

In a design that combined assessment of short term and long term stability, **Bukowski and Newcomb (1984)** carried out a study on fifth grade boys and girls (N=334) and were tested twice while they were in five elementary schools and three times after they had entered a single consolidated middle school. At each of these meetings, they were asked to nominate three same sex best friends and three disliked same sex peers and to nominate peers for 14 roles in a hypothetical class play. Evidence indicated greater consistency of liked and disliked peer choices among girls than among boys, and *popularity* was only slightly related to *consistency in friendship relations*.

Rejected, neglected, popular and average status children were selected by **French and Waas (1985)**, on the basis of positive and negative sociometric measures from a total sample of 870, 8 and 11 year old children. Teachers completed the school behaviour checklist and parents completed the child behaviour checklist for selected children. On both scales, rejected children were found to exhibit *more behaviour problems* than neglected, popular or average children. Neglected children did not exhibit more behaviour problems than children of average status.

Developmentalists have distinguished between the two sets of children and adolescents who are not popular with their *peers* - those who are neglected and those who are rejected (**Parker and Asher, 1987**). Neglected children, while they may not have friends, are not especially disliked by their peers. Rejected children are more likely to be disruptive and aggressive than neglected children. And rejected children are more likely to continue to be unaccepted by peers even when they move into a new setting; neglected children seem to get a new social life in new groups. Rejected children say they are lonelier and less happy as well.

In the study of **Parker and Asher (1988)** the low accepted children reported less supportive *relationships with best friends* than did other children, but neither study distinguished rejected from neglected children.

The distinction between *friendship adjustment and acceptance by the peer group* was examined by **Parker and Asher (1993)**. Third through fifth grade children (N=881) completed sociometric measures of acceptance and friendship, a measure of loneliness, a questionnaire on the features of their very best friendships and a measure of their friendship satisfaction. Results indicated that many low-accepted children had best friends and were satisfied with these friendships. However, these childrens' friendships were lower than those of other children on most dimensions of quality.

**Leelavathi (1996)** studied 270 subjects (135 populars and 135 unpopulars) and the findings indicated that there was a significant difference between populars and unpopulars on their *friendship status*, populars were having higher friendship status than unpopulars.

**Dekovc and Janssens (1990)** conducted a study on relationships between *parent's child rearing style*, the child's prosocial behaviour, and the child's sociometric status. The sample consisted of 112 children (6-11 years of age) and both their parents. Parental behaviour in the interaction with the child was observed at home when parents and child worked together in two structured tasks. Factor analyses of parental behaviour revealed that two factors, Authoritative/Democratic and Authoritative/Restrictive, can be found in the samples of mothers and fathers. These two dimensions of maternal and paternal behaviour appeared to be predictive of both the child's prosocial behaviour and sociometric status.

**Aparajita and Chetana (1995)** studied the peer rejected and non-rejected primary school children. A sample of 270 children (135 boys and 135 girls) were selected by their peers in the classroom situation belonging to rejected and non-rejected groups. Peer nomination and sociometric test were used which had the procedures to classify the children into different peer social status with respect of age. The results indicated that popular children came from small and higher class families whereas rejected children from large and uneducated families. The *parent child relationship* was very poor among rejected children. The values of lower class families did not help either individual development or social development.

The following studies reviewed showed that maternal disciplinary styles had an affect on the sociometric status of children. Further, these studies revealed that there was a significant relationship between social knowledge of mothers and the social knowledge, behaviour, sociometric status of the children.

In a study by **Putallaz (1987)**, the relation between *maternal behaviour* observed during the play sessions of mother child pairs and the childrens' social behaviour and sociometric status were examined. In addition, the relation between the childrens' sociometric status and maternal behaviour exhibited when interacting with another mother, as well as child dyadic behaviour, was assessed. Results indicated that behaviours exhibited in all three contexts (i.e. mother-child, mother-mother, child-child interaction) were related to one another and to sociometric status. Finally, the relation between maternal social knowledge and the social knowledge, behaviour and sociometric status of the children was investigated. Again, analyses revealed significant relations.

To explore relations between *maternal disciplinary styles*, childrens' expectations of the outcomes of social strategies, and childrens' peer status, **Hart et al. (1990)** conducted a study. One hundred and forty four (144) mothers and their first (N=59) and fourth (N=85) grade children (ages=70 to 86 months and 116 to 129 months, respectively) participated in home interviews prior to the beginning of the school year. Measures of childrens' sociometric status were obtained in classrooms after the school year began. Results indicated that children of mothers who were more power assertive in their disciplinary styles tended to be less accepted by peers and tended to expect successful outcomes for unfriendly-assertive methods for resolving peer conflict.

**Roff, Sells and Golden (1972)** revealed that low accepted children reported less favourable *relationships with fathers* than did other children.

From the review of above studies it was evident that social isolates were more seriously disturbed, show less ability to control their emotions, egocentric, moody and impulsive, highly submissive and easily pushed around, spend more time alone, make fewer social contacts, acted inappropriately, disrupted ongoing play, inept or aggressive, hostile, task avoidant and shows low levels of cognitive abilities. Social isolates were differed in their knowledge of how to make friends and on the referential communication task.

Sociometric stars were sociable, involved with people, healthy, vigorous, well poised, capable of initiative, adaptable, conforming, dependable, affectionate, considerate and original thinkers, attractive, spent less time in day dreaming, cooperative, supportive, good leaders, good sharers and talkative.

### **2.3 SOCIO METRIC STATUS AND SELF-PERCEPTION**

Self-perception is an individual's interpretation of himself. A strong self-perception helps children believe in and rely on themselves. A healthy self-perception aids the child's capacity to cope with the environment. Repeated successes in solving life problems may lead to high self-perception, whereas continued failures may lead to low self-perception.

Children who are rejected by their peers often report lower levels of self-perception. Success in the tasks the child sets out to achieve, leads to a feeling of confidence and self acceptance, while failure makes for a feeling of inadequacy. The more prestigious the activity, the greater the effect of success or failure on the self-perception. Repeated failures have a damaging effect on a child's personality.

In a study of over 2,000 adolescents, **Feinberg (1953)** found that young persons who were accepted by others had, on the whole, a more favourable view of themselves than the rejected ones and that they had better *relationships with their parents and teachers*.

Popular children think moderately well of themselves, rather than showing extremely *high* or *low* levels of self-perception (**Reese, 1961**).

**Medinnus (1965)** investigated that adolescents high in self acceptance and adjustment perceived their parents as loving and not as neglectful or rejecting. Self-regard was more closely related to their mother's rather than their father's child rearing attitudes. The correlations between self-regard measures and evaluations of *parent's child-rearing attitudes* were higher for boys than for girls.

**Patterson *et al.* (1990)** studied the relations among childrens' reports about their own competence, subjective measures of their competence, and their views of important relationships with others as a function of sociometric status, 515 third and 4th grade children responded to questions about aspects

of their personal competence and about their relationships with *mothers*, *fathers*, *teachers* and *best friends*. Rejected children reported the least supportive relationships overall with their fathers of any status group. Neglected children reported the lowest perceived social competence with peers. The subjective reports of rejected but not neglected children overestimated their social competence as rated by peers. Relative to teacher reports, rejected aggressive children also overestimated their behavioural competence.

**La Gaipa and Wood (1973)** presented evidence to show that unpopular children who were socially withdrawn differed from the normal children in the concepts that they had about *friendship* and they appeared to be behind in social development as a result of decreased contacts consequent on the lack of usual friendship expectancies.

**Chambblis et al. (1978)** investigated relationship between social self concept and popularity. Results indicated a positive relationship between self concept and *peer acceptance*.

High self-esteem is more likely to lead to *acceptance by peers* than either very high or very low self-esteem. Exaggerated reports of self-esteem may be inaccurate; in addition, children who say they are wonderful may be perceived as arrogant and thus turn others away (**Cook, Goldman and Olczak, 1978**).

**Mannarino (1978)** selected 60 male sixth graders, with an equal number in the *chumship* and nonchumship groups as subjects for the study. Self-concept was measured with The Piers-Harris Childrens' Self Concept Scale. It was found that children involved in a chum relationship possessed significantly higher self-concepts than those without a chum.

**Kahle (1980)** conducted a study that annually monitored the self esteem and *interpersonal problems* of over 100 boys during their sophomore, junior, and senior years of high school. Cross lagged panel correlation differences show that low self-esteem leads to interpersonal problems in all three time lags when multiple interpersonal problems constitute the dependent variable but not, when single interpersonal problem criteria constitute the dependent variable.

The hypothesis that self-perceptions would be more advanced developmentally than *peer perceptions* was assessed by **Bernstein (1983)**. The sample consisted of 80 males between 15 and 18 years of age. A structured interview was employed to obtain descriptions of self and a best friend. These data were coded into systems defining the constructs of differentiation, abstraction and integration. The study's hypothesis was supported and found that self-perceptions were developmentally more advanced than peer perceptions.

A study done by **Govind and Rama (1984)** indicates that the *popular* children possess more positive self-concept in comparison to the *rejected* children.

**Crick and Ladd (1988)** have observed *greater loneliness* among rejected children and reported an association between low peer status and depression. He concluded that the generally negative picture of unpopular children as *anxious, lonely* and *depressed* suggests that these children may also be expected to report *low self-concepts*.

Children who are friendly and self-confident in turn win more friends. As their *popularity* increases, their self-assurance and *leadership qualities* also grow stronger and they develop a positive self-concept (**Dodge et al. 1989**).

**Boulton (1990)** investigated *childrens' perceptions* of the relative strength of themselves and their peers in two classes of eight year old children and two classes of four year old children. Each child ranked his order in the entire class in terms of *strength and linking*. Previous investigators have assumed that such strength perception reflected the dominance structure of the group. The present results, replicating previous findings, indicated that children consistently over estimate their place in this hierarchy in relation to their peers perceptions.

**Buhrmester (1990)** examined the hypothesis that (a) intimacy of friendship is more integral to *socio-emotional adjustment* during adolescence than preadolescence, and (b) that competence in close relationship skills is more important during adolescence than preadolescence. Subjects were 102, 10-13 year old preadolescents and 70, 13-16 year old adolescents. *Self and*

*friend rating of friendship intimacy* were gathered using a two step procedure ensuring that students rated only reciprocated friendships. The findings supported that the ability to establish intimate friendship become increasingly important during early adolescence.

The study by **Hymel et al. (1993)** examines whether subgroups of unpopular children differ in terms of competence in multiple domains. Specifically, subgroups of aggressive unpopular, withdrawn unpopular, and aggressive-withdrawn unpopular and average status children were identified on the basis of *peer evaluations*. The subgroups were then compared in terms of peer and self-perceptions of competence in various nonsocial and social domains. Results indicated that the three subgroups of unpopular children exhibited distinct profiles according to peer perceptions, with aggressive-withdrawn unpopular children being viewed as deficient in virtually every area assessed, and aggressive unpopular and withdrawn unpopular children viewed as exhibiting particular strengths and weaknesses across domains. In terms of self-perceptions, results indicated that withdrawn - unpopular children expressed more accurate, but negative self-evaluations, while children in the aggressive subgroups tended to overestimate their competencies.

**Aparajita et al. (1997)** found that there exists a marginal difference in different areas of self - concepts between the elementary school *boys and girls* belonging to different sociometric status. *Parents of popular children* were found to give more opportunity to their children to have outside visits

at least once in a week, whereas such type of exposure was found to be less frequent among the peer rejected children. About fifty per cent (50%) of the popular children were found to spend atleast 3 to 4 hours per day with their peers whereas only fifteen per cent (15%) of peer-rejected children *spent their time in peer group activities*. Though not much significant difference was obtained in the development of self - concept among subjects belonging to different *sociometric status groups*, the trend for the popular group was certainly towards the development of positive self-concept.

The study by **Boivin and Hymel (1997)** evaluated a social process model describing how aggression and withdrawal lead to negative social self-perceptions. The model posited both direct (ie. cognitions associated with withdrawal) and indirect (ie mediations of negative peer status, and peer experiences) influences. Eight to ten year old children (N=793) completed *peer assessment measures* of aggression, withdrawal, peer status, victimization and affiliations, and self-reports of loneliness, perceived acceptance, and perceived behaviour conduct. The model was supported for social self-perceptions but not for perceived behaviour-conduct. Withdrawn behaviour uniquely predicted social self-perceptions. Both negative peer status and peer victimization successively mediated the impact of social behaviour on loneliness and perceived acceptance. Classroom affiliations did not mediate social self-perceptions.

**Chetanapati and Jaya (1997)** found positive relationship between *social preference score* and self - concept score of both popular and rejected children.

**Maslow (1970)** showed that children with distorted self-concepts tend to be *more anxious and less adjusted, less effective* in groups and in the tasks of life than the children with more adequate self-concepts.

**Anantharaman (1980)** reports that those individuals who have positive self-concept are *better in adjustment* than those who have negative self-concept.

Self-perceptions of unpopularity in 404 high school students were found to reflect current *emotional and behavioural distress*. **Cohen, Reinhertz and Frost (1994)** studied these youths from age 9 to 15 to examine early risks and current factors associated with perceptions of unpopularity. Feelings of unpopularity in middle childhood increased the risk of similar feelings in adolescence. However self reports of unpopularity at age 9 were not strong predictors of emotional and antisocial problems at age 15.

**La Gaipa and Irwin (1976)** showed results with disturbed adolescent girls and suggest that the perceptions of self by these individuals tended to create differences in the *reciprocal role relationships* that develop in normal intense *female* adolescent friendships.

It was evident from the above studies that adolescents who were accepted by others had a more favourable view of themselves than those who were not accepted by others. Social isolates over estimated their behavioural competence. The results of the above studies indicated that social isolates expressed negative self evaluations. Sociometric stars expressed more positive

self-perception than social isolates. Sociometric stars think moderately well of themselves, rather than showing extremely high or low levels of self-perception. There is a positive association between the way sociometric stars see themselves and the way their parents and friends think they view themselves.

## **2.4 SOCIOMETRIC STATUS AND ADJUSTMENT**

Individuals who are self-acceptant, accept themselves just as they accept others as friends whom they like. When they like themselves reasonably well, they behave in a manner that leads to social acceptance. The more others like and accept them, the better children like themselves and the more self acceptant they become. This leads to good personal and social adjustment.

A group of 80 children in an elementary school were studied by **Bonney (1944)** using the California Test of Personality and A Multiple Criterion Sociometric Questionnaire. The author found that the total *adjustment* score of the inventory correlated 0.49 with sociometric status.

**Grossman and Wrighter (1948)** found that sixth grade students who were very high in *sociometric status* secured much *higher total adjustment* scores on the California Test of Personality than did a similar group of students who were very low in sociometric status.

A large number of fifth and sixth grade students were divided into three *sociometric status groups* by **Baron (1951)** and compared in their responses to a mental health inventory. In general, the inventory appeared to differentiate among the three status groups, with the *low in social status* making more '*unfavourable*' responses than either of the other groups.

**Sharma (1970)** conducted a sociometric study in 36 schools in Delhi and 36 schools in Rajasthan. The study showed that out of 1213 students in Delhi schools, about two-thirds of the students in each class were 'unaccepted'. About thirteen per cent of the students were populars, twenty two per cent were neglects and about twelve per cent were isolates. In 36 Rajasthan schools, 1338 students were tested. Results showed that the populars were on the average of higher *intelligence* than the isolates and scored higher in scholastic achievement also. The populars had a better adjustment score than the isolates in the five areas - *home, health, social, emotional and school*. The *fathers* of the populars had higher education and income than the fathers of the isolates. With respect to personality characteristics, it was found that populars were more aggressive, assertive, vigorous, confident and friendly than the unaccepted students who were more submissive, non-confident, selfish and non-cooperating.

**Pathak (1971)** reported that *social and economic variables* were commonly regarded as of prime importance for acceptance and rejection of the pupils by their classmates. The isolates and rejectees were expected to emerge due to unfavourable socio-economic conditions in the family. The purposive

sample consisting of 47 populars, 17 isolates and 37 rejectees were drawn for the study. Results revealed that sociometric status, irrespective of father's economic position was related to father's educational and professional background.

**Pathak (1975)** showed that socially accepted pupils had better adjustment pattern than the socially unaccepted ones. The selected sample included 80 populars, 80 neglects, 20 isolates and 20 rejecters who were administered *socio school adjustment inventory*. The results were (1) populars were found to be superior to their counterpart peers of neglects, isolates and rejecters in their socio-school adjustment, (2) Neglects were better than isolates and rejecters in their socio-school adjustment, (3) Isolates and rejecters showed similar trends in their socio school adjustment.

**Vernberg (1990)** examined the relationship over time involving three types of experiences with peers (amount of contact with friends,intimacy with best friend, rejection by peers) and two indices of *psychological adjustment* (self-perceived social acceptance and depressive affect) using longitudinal and causal analytic procedures developed within the life stress paradigm. Data were collected twice on a sample of 73 young adolescents, with a six month interval between measurements. The results provide partial support for a model of reciprocal influences between experiences with peers and adaptation, since adaptation was predictive of change over time in peer experiences in several instances as well as vice-versa.

**Kundu and Maiti (1985)** attempted to ascertain the various factors, *social and psychological* that contribute towards the development of isolation in the school children. The study was conducted upon 300 school children of their age range 7.5 to 12.5 years. The tools used were as follows (1) A sociometric questionnaire (2) A 5-point rating scale (3) An information schedule (4) Indian version of Children Apperception Test (5) Raven's Progressive Matrices (6) Achievement record. The results of the study clearly indicated that isolated children significantly differed from popular (having a high degree of social acceptance) and normal (having a moderate degree of social acceptance) children in several psychological factors determining personality development and also in some important social factors determining their cultural and environmental back ground.

**Dishion (1990)** studied the association between boys' *peer relations, their antisocial behaviour, academic skill deficit, and family ecology* with two cohorts of boys and their families (N=206). Group comparisons revealed that rejected boys experienced poorer family management practices (i.e. monitoring and discipline practices) showed more family stress, were of lower socio economic status and displayed more behavioural and academic problems than did their average peers.

**Lewis et al. (1993)** examined similarities among 45 sibling pairs in grades two to five in their *social and academic adaptation to the school setting*. Measures included teacher ratings and rankings of academic skills, social behaviour, and peer acceptance, peer sociometric ratings; and direct observations on the play ground with peers and in the classroom with

teachers and peers. Comparisons were made with randomly selected, unrelated, subject pairs matched on sex, grade, and classroom. Significant correlations were found only among sibling pairs on peer ratings of social preference, teacher's judgments of academic competence, popularity, *social behaviour and school adjustment*, positive behaviour with peers on the play ground, and teacher's disapproving behaviour in the classroom. The results underscore the need for more multiagent and multimethod research on sibling concordant - discordant adjustment regardless of theoretical orientation.

**Crandall and Bellugi (1954)** studied thirty girls in order to find the relationships between *personal-social adjustment and interpersonal and intrapersonal conceptualizations*. They found a positive but nonsignificant relationship between the level of the subjects' adjustment and favourable peer perceptions of them, and the subjects' overall adjustment was found to be related to their self-conceptualization but unrelated to their ideal-conceptualization.

Youngsters who are rejected or unpopular frequently face negative consequences. Research consistently reveals that *negative group experiences* may cause such *maladjustment* as neurosis or delinquency later in life (**Roff, 1974**).

**Parker and Asher (1987)** investigated that rejected children have more *serious adjustment problems*, while the risk status of neglected children is less certain.

**Jaiprakash (1994)** investigated three sociometric groups, populars, rejectees and neglectees and compared in the context of their *14 personality traits* and *level of adjustment* to investigate whether the sociometric status had any relationship with the personality traits and their adjustment level. Not much of difference is found in the three groups in respect of personality traits. As regards the level of adjustment the populars are definitely superior to the rejectees and neglectees in each area of adjustment.

From the above review it was evident that sociometric stars were superior to the social isolates in each area of adjustment and it was also evident that socialization among one's peers is a symbol of good social adjustment, and good social adjustment is regarded as a symbol of success. Social isolates makes more 'unfavourable' responses than sociometric stars. Social isolates frequently face negative consequences and it results social maladjustment.

## **2.5 INTERVENTION STRATEGIES FOR IMPROVING SOCIAL SKILLS OF SOCIAL ISOLATES**

According to **Asher and Dodge (1986)** social acceptance can be facilitated by shaping socially desirable behaviour through reinforcement or modeling and by directly coaching improved social skills. Because of the relationship between social acceptance and personality development, improving acceptance is a means to better mental health, better personal and social adjustment, and greater happiness.

The positive relationship between sociometric status and adequacy of personal adjustment seems well established. One implication of this relationship is the possibility of utilizing sociometric data as an index of changes in adjustment. **Cox (1953)** obtained sociometric choices for 52 children (aged 5 to 13) in an Australian orphanage. Sociometric status was found to correlate 0.76 with composite adjustment ratings based on TAT stories, a social adjustment questionnaire, and interviews with those caring for the children. The children were divided into 2 groups, matched for age, sex, residential placement ratings, and the sociometric measure. One of the groups received several weeks of *play therapy* while the other served as a control group. The sociometric procedure was repeated after 10 weeks of therapy and then again after an additional 14 weeks. At each testing, the experimental group showed a significant increase in sociometric status, while the control group showed no change.

**Early (1968)** used sociometric methods in an ingenious study in which she used *classical conditioning* to manipulate *interpersonal attraction* in elementary school children. She first conducted a sociometric survey of two classes of 4th and 5th grade pupils and identified the isolates. During the days following observer noted the interaction between the isolates and their classmates. Results showed that those isolates whose names had been paired with positive words were approached more frequently than those in the control group. The isolate children previously tended to be unresponsive to others. After the experimental treatment, however, the isolates in the experimental group showed more animation, spoke to their peers often and engaged in more active play.

**Oden and Asher (1977)** coached socially isolated children in third and fourth grades about *how to play with others, pay attention, cooperate, take turns, share, communicate and give support and encouragement to their peers*. Several days after the six coaching sessions has been completed all third and fourth grade children were asked how they enjoyed playing with each of their classmates. The popularity rating for the coached children had increased significantly and their improvement was still evident one year later.

**Selman, Newberger and Jacquette (1977)** have designed a *peer therapy programme* to help students improve their peer relations in *classroom setting, group activities and sports*. First there is a weekly peer problem solving session in the classroom in which the peers work cooperatively to plan activities and relate problems. At the end of each week the peers evaluate their effectiveness in making improvements in areas like cooperation, conflict resolution and so forth. Second the members of a class, numbering from 6 to 8 students, plan a series of weekly field trips. When each activity is completed the students discuss how things went and what might have been done to improve social relations. Third, when students find themselves in highly frustrating circumstances they are allowed to leave the school room and go to a private time out area of the school to regain their composure. In time-out students also are given opportunity to discuss the problems with counselor. Fourth during social studies and current events discussion sessions, students evaluate a number of moral and social issues.

**Mc Cullagh (1982)** conducted an assertion-training program for *shy*, *quiet junior high school males* who lacked friends. The author noted that these students were typically overlooked by *teachers* because they did not present disruptive behaviour problems. His programme included a) developing social skills, b) expressing positive and negative feelings, c) expressing one's needs, desires and opinions; and d) increasing physical assertiveness. For each component, difficult social situations were described to students, who then imagined their own response. The trainer *modeled and coached assertive responses*, and then students were asked to compare their imagined response with the modeled behaviour. The results indicate that no differences were found between three groups receiving audio and/or videotaped feedback about their performance or audiotape plus specific assertion problems for resolution. The programme proved to be effective in *enhancing and maintaining assertion skills* and increasing participants' friendships.

In an another successful coaching programme **Ladd, (1981)** coached unpopular third graders on three *communication skills* : asking positive questions, offering useful suggestions or directions, and offering supportive statements. Children participated in eight 40 to 50 minute sessions over a three week period. During these sessions, the adult "Coach" verbally instructed children in the concepts, guided them through rehearsals of the

ideas, letting the children practice on their own while playing with a classmate, and reviewed the concepts following the practice session. The review phase involved teaching the children to evaluate their own behaviour in relation to what they had learned about successful social interaction. Assessments immediately after the training programme and again four weeks later indicated that the coached childrens' popularity increased.

**Ladd (1981)** selected 36 children with low scores in *behaviour and peer acceptance* and were randomly assigned to one of three experimental conditions; skill training, attention control, and nontreatment control. Children in the training condition were coached in three social skills, asking questions, leading and offering support to peers. Sociometric and *observational assessments* were conducted upon completion of the experimental procedures and at follow up. Trained children spent a significantly greater percentage of time engaging in two of the three trained skills at post test and follow up, whereas control group children remained the same or declined. Unlike their control group counter parts, trained children also evidenced significant and lasting gains in classroom peer acceptance.

**Schloss, Schloss and Harris (1984)** present a *social skills training* package developed for three severely depressed adolescents. Twenty 30 to 40 minute sessions consisted of *adult modeling, behaviour rehearsal, feed back, and contingent social reinforcement*. The social skills taught were relatively simple greeting and conversational behaviours. Although a separate trainer conducted the sessions, teachers were involved in monitoring and reinforcing

targeted prosocial behaviours. The programme yielded modest gains in student's interpersonal responses. The limited success of this treatment approach may have been partly due to exempting classmates from direct involvement in the intervention. When treatment is administered individually, students may continue to be strongly influenced by peers in the classroom setting, regrettably, often in an undesirable direction.

**Dodge (1985)** presents a five faceted scheme of *childrens' social interaction* that elucidates different levels of assessment and intervention. In brief, Dodge's model includes a) the judgments of social competence by peers and authority figures, b) observable social behaviours, c) social tasks or domains of interaction, d) unconscious influences and e) social information processing. This frame work succeeds in delineating the major domains of social skills training programmes to date. The task for researchers is to integrate these distinct components into effective *multimodel programmes* that affect not only individual students but also the environments (eg. school settings) in which they are socialized.

In an investigation by **Weissberg (1988)**, boys and girls in a low income area of New Jersey were given instruction in *social decision making, self control, and group awareness*. When compared with boys and girls who did not receive the training, the programme participants were more sensitive to the feelings of others, more mindful of the consequences of their actions, and better able to analyze problem situations and act appropriately.

**Jennifer and Michael (1990)** conducted research on training programmes for the development of interpersonal functioning in socially maladjusted adolescent females. Females in a residential institution participated in a *role-play programme* designed to enhance social perspective taking ability. In 15 sessions girls were coached in specific *social skills* and acted multiple role perspectives in typical problem situations. Compared to girls in a fitness training programme, girls in the role-play training programme showed enhanced performance on a measure of social perspective taking. Generalized effects were also found for performance on tests of interpersonal problem analysis, empathy, and the acceptance of individual differences. Additionally, observational data indicated that role-play training resulted in increased prosocial behaviours. Role play training had no effect on a measure of referential communication.

**Marg (1979)** attempted an investigation to assess the *effectiveness of two components of parent training programmes*; 1) the effect of a self behaviour management project to intervention with deviant child behaviours, and 2) that of social reinforcement from peers and the consultant. Four groups of parents were exposed to a basic training programme and were measured on their success in an intervention programme in the inappropriate behaviour of their children (ages 7 to 9 years). Two groups of parents were requested to do a self modification programme prior to the intervention with deviant child behaviour; two groups did a child intervention programme without a self management received, verbal social reinforcement from peers and the consultant during interventions. Results obtained indicate that the

parent group whose training involved a self behaviour management project prior to intervention with their child's inappropriate behaviour and verbal social reinforcement achieved a significant greater reduction of these behaviours when compared to the groups where either self management or social reinforcement was used.

**Mansdorf (1986)**, in the treatment of socially withdrawn boys, combined *operant and cognitive methods of training*. An effort was made to increase class participation by volunteering, initiating social interactions and other assertive acts. Operant training procedures described by the author included *social reinforcement* via praise by mother when a positive behaviour was noted. The other aspect of training, which included a self control component where responses such as asking to join in with others in playing were employed. Training sessions of one hour per week were conducted and focused on training assertion skills. With respect to this latter behavioural treatment approach, it was further strengthened and encouraged by *feedback, support, and encouragement from his mother*.

In one coaching study by **Mize (1985)**, students with few friends were selected and trained in ways to have fun *with peers*. The unpopular students were *encouraged to participate fully, to show interest in others, to cooperate, and to maintain communication*. A control group of students (who also had few friends) was directed in peer experiences, but was not coached specifically in terms of improved peer strategies. Subsequent *assessment* revealed that the coaching was effective, with the coached group showing more sociability when observed in peer relationships than their noncoached counterparts.

*Peer leader involvement* in social competence training may be especially helpful with adolescents in order to *model more prosocial behaviour*. For example, **Bierman (1986)** successfully implemented a *conversational skills training* format with pre-adolescents whereby a *competent peer was paired* with a less socially skilled classmate for videotaped co-operative activities; some less competent students received coaching in conversational skills. Both coaching and positive peer responses were associated with successful outcomes. These findings suggest that inclusion of socially skilled peers in social competency interventions might enhance treatment outcomes.

**Kathryn and Cynthia (1993)** examined relations among strategy *knowledge about making friends, prosocial and antisocial behaviour, and peer acceptance* at school during early adolescence. Based on a sample of 423, sixth and seventh grade students, findings indicated that knowledge of both appropriate and inappropriate strategies for making friends was related significantly to both types of social behaviour and to peer acceptance. Results also suggested that displays of prosocial (but not antisocial) behaviour represent an intermediate process that links knowledge about making friends and peer acceptance. These results were obtained even when taking into account significant relations of IQ to strategy knowledge, social behaviour and peer acceptance.

**Morris, Messer and Gross (1995)** assessed utility of a *peer pairing procedure* for enhancing the sociometric status and positive social interaction of peer neglected children. Sociometric nominations for 229 subjects were

obtained and used to identify 24 peer neglected, 26 popular and 24 average children. Peer neglected and popular subjects were randomly assigned to peer pairing or to control conditions. Each neglected subject in the pairing condition was paired with a popular subject from his or her own classroom, and the pairs participated 12 to 15 minutes *play sessions* over four weeks. *Behavioural observations* of social interaction were conducted for subjects during recess. Sociometric nominations and behavioural observations were reconducted after interventions and one month after treatment. The paired group experienced significant improvement in both sociometric status and positive interaction rate compared with controls and improvement was maintained at one month follow up.

Yet another approach has been to pair socially isolated children with a younger *playmate for free play* (**Furman, Rahe and Hartup, 1979**). After ten play sessions the withdrawn children have been observed to be more sociable when they are back in their classrooms, presumably because they have had the chance to assert themselves and to play dominantly and successfully with the younger children.

**Shure and Spivak (1980)** developed extensive training programmes to teach children better ways of dealing with interpersonal relationships; they evaluated these programmes for two years. Children were tested in *cognitive problem - solving skills and adjustment* at the beginning and end of each

year. Those who received the training performed significantly better than the untrained control group in all skills. Among the children who were initially poorly adjusted, those who received the training were rated as better adjusted afterwards, whereas those who did not receive the training had not improved.

Study by **Stephanie and Emory (1985)** explored the effects of a social studies *peer-teaching intervention* on student perceptions of class environment, adjustment, and academic performance. There were 45 students in the experimental group and 46 controls from four fifth-grade classes in a suburban, predominantly white, middle class school. The Classroom Environment Scale (CES) and a School Opinion Survey were used to assess student views of the classroom. Students completed self-esteem and peer sociometric rating measures and teachers submitted adjustment ratings for all pupils. After the intervention, experimental groups compared to control groups came to see their classes as more involved, orderly and organized, and competitive, and reported being happier in class and enjoying aspects of their school work more. Both groups improved directionally in peer liking, though control groups did so more than experimental groups. Teachers rated experimental groups as having increased competence and decreased in problems after the programme.

In one investigation middle school adolescents were instructed in ways to improve their self control, stress management, and social problem solving (**Weissberg, 1988**). For example, as problem situations arose *teachers*

*modeled and students practiced six sequential steps; 1) stop, calmdown, and think before you act; 2) go over the problem and state how you feel; 3) set a positive goal; 4) think of lots of solutions; 5) plan ahead for the consequences; 6) go ahead and try the best plan.* The 240 adolescents who participated in the programme improved their ability to devise cooperative solutions to problem situations and their teachers reported that the students showed improved social relations in the classroom following the programme.

From the review of above studies, it was evident that peer involvement in social competent training would be helpful with social isolates in order to model more prosocial behaviour. Peer pairing procedures were used for enhancing sociometric status and positive social interaction of social isolates.

Parent training programmes are very important for their childrens' social development. Social interactions of children can be strengthened by feedback, support and encouragement from parents. By the implementation of parent oriented strategy children can be improved their social skills, academic improvement and also each area of adjustment as well as self-perception.

In teacher oriented intervention programme subjects improved their ability to devise cooperative solutions to problem situations and showed improved social relations in the classroom following the programme.

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## Overview

The following are some of the salient inferences stemming from the review of available literature.

- Social isolates were more seriously disturbed, show less ability to control their emotions, moody and impulsive, highly submissive, spend more time alone, make fewer social contacts, disrupt ongoing play and hostile. Sociometric stars were sociable, involved with people, vigorous, capable of initiative, affectionate, original thinkers, receives more positive reinforcement, spent less time day dreaming, cooperative, supportive, good leaders and good sharers. Sociometric stars and social isolates differed in their knowledge of how to make friends.
- Children who are isolated by their peers often report lower levels of self-perception. The persons who were accepted by others had, on the whole, a more favourable view of themselves than the isolated ones.
- Sociometric stars were superior to the social isolates in each area of adjustment. Social isolates face more serious adjustment problems. Social isolates are social insensitive and maladjusted.
- Isolated children can be trained in the kinds of skills that are effective in establishing better social relationships, which inturn improve their self-perception and adjustment.

## *Chapter - 3*

# METHODOLOGY

## **METHODOLOGY**

### **General Plan**

Pre testing of self-perception and adjustment of different sociometric status groups (sociometric stars, average chosen, social isolates); planning and implementation of intervention strategies for social isolates and, post testing of self-perception and adjustment scores of different sociometric status groups (sociometric stars, average chosen, social isolates) are the main objectives of the study.

In the first stage, "The Test For Social Acceptability Among Peers"; "Scales Measuring Self Perception" and "Bell Adjustment Inventory Revised (1962) Student Form will be tested on a sample of 75 subjects (25 sociometric stars, 25 average chosen and 25 social isolates).

In the second stage, "The Test For Social Acceptability Among Peers" will be administered and 125 sociometric stars, 125 average chosen and 125 social isolates will be identified as the sample for the study. To these 375 subjects, Scales Measuring Self Perception and Bell Adjustment Inventory will be administered.

The third stage includes planning and implementation of intervention strategies. One hundred and twenty five (125) social isolates will be divided into four groups. Three intervention strategies namely 1) Peer oriented, 2)

Parent oriented and 3) Teacher oriented will be planned. One strategy will be implemented for each group. For the fourth group of social isolates all the three strategies together will be implemented. Scales Measuring Self Perception And Bell Adjustment Inventory will be administered again to the total sample after the completion of intervention period.

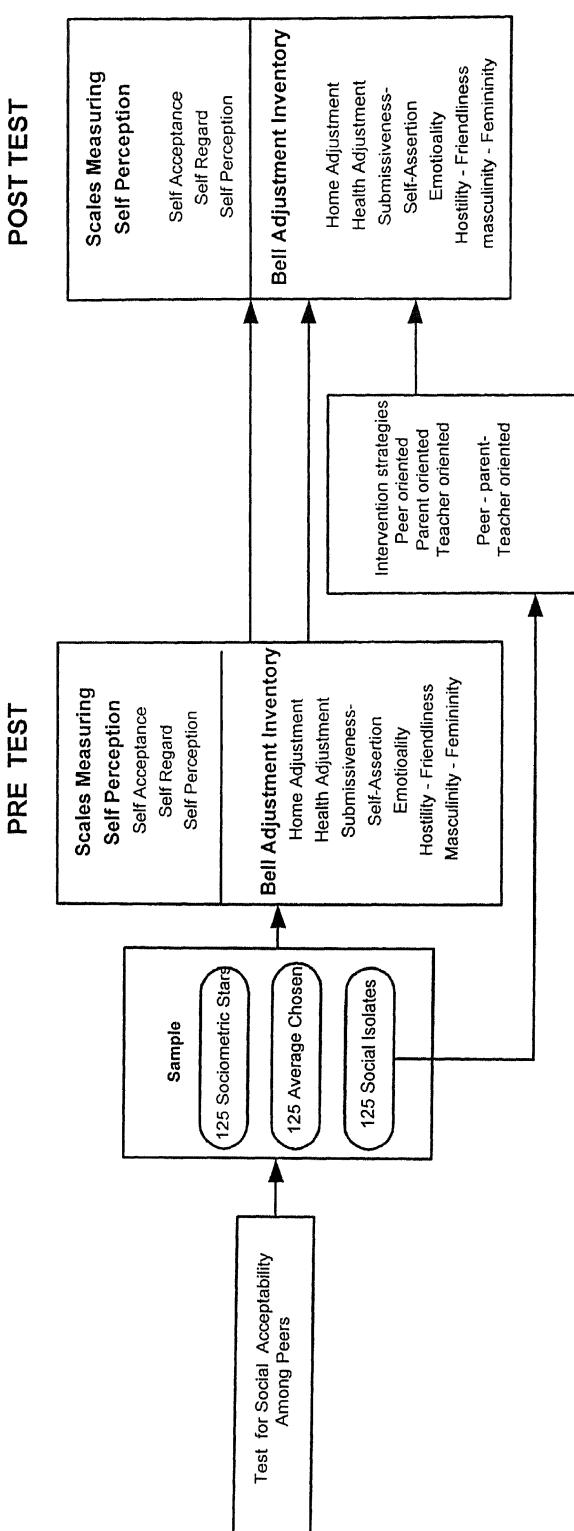
t-test will be used to know the significant difference between post and pre test scores of sociometric stars, average chosen and social isolates on self-perception and adjustment. Fig. 1 shows the flow chart of study design.

### **3.1 SAMPLE**

The study was conducted in Nidadavole town. Nidadavole is a semiurban area which is in West Godavari district of Andhra Pradesh state, India. The sample for the study was selected in two stages. The selection of four schools was done in the first stage. Then 16 classes were selected from 7th, 8th, 9th and 10th standards of the four schools in the second stage. The total number of subjects included in 16 classes were 565 children. Table 1 shows standard/sex wise distribution of the sample. "The Test For Social Acceptability Among Peers" was administered to all the 565 students.

**Table 1. Standard/Sex wise Distribution of the Sample**

Standard	Sex		Total
	Boys	Girls	
7	80	92	172
8	49	100	149
9	76	48	124
10	55	65	120
<b>Total</b>	<b>260</b>	<b>305</b>	<b>565</b>



**Fig.1 Study Design Flow Chart**

As per the manual those falling in the top 25 per cent were regarded as the sociometric stars, those having 26 to 75 per cent were regarded as the average chosen and those having scores in the bottom 25 per cent were regarded as the social isolates. On the basis of scores on The Test for Social Acceptability Among Peers 125 subjects were identified as sociometric stars, 283 were average chosen and 157 were identified as social isolates. From them 125 sociometric stars, 125 average chosen and 125 social isolates were selected randomly. Table 2 shows standard and sex-wise distribution of sociometric stars, average chosen and social isolates.

**Table 2. Standard/Sex wise Distribution of Sociometric stars, Average Chosen and Social Isolates**

Standard	Sociometric Choice Status						Total	
	Sociometric Stars		Average Chosen		Social Isolates			
	Boys	Girls	Boys	Girls	Boys	Girls		
7	16	17	22	19	15	15	104	
8	12	21	12	18	15	30	108	
9	18	13	14	11	15	10	81	
10	13	15	14	15	15	10	82	
	59	66	62	63	60	65	375	
	125		125		125			

## **3.2 TOOLS AND TECHNIQUES**

### **3.2.1 The Test for Social Acceptability among Peers (TSAAP)**

### **3.2.2 Scales Measuring Self Perception (SMSPI)**

### **3.2.3 Bell Adjustment Inventory Revised (1962) Student Form**

#### **3.2.1 Adoption of TSAAP**

The items of TSAAP were translated into Telugu, the regional vernacular language. The items were prepared with care and precaution to retain the original meaning. The language of items was checked by language expert and necessary changes as suggested were made. These items were administered to a sample of ten subjects to know the difficulties in answering the questions. Minor changes in language and sentence construction were made with the experience gained. English and Telugu versions of TSAAP were given in Annexure-i and ii respectively.

##### **3.2.1.1 Pre Test**

TSAAP was administered to 150 subjects of 7th, 8th, 9th and 10th standards. The subjects were requested to name their group fellows with whom he likes to associate for different activities according to their choice of preference. Subjects were asked to respond without omitting any item. No time limit was imposed.

### **3.2.1.2 Scoring**

One mark was assigned for each choice received by a subject. The total number of choices on all the four activities received from the group fellows in his/her group denote his/her sociometric score. The subjects in every group then arranged in the rank order in accordance with their total sociometric score. If any 2 or 3 subjects got the same score, then importance was given to order of choice preference. Those falling in the top 25 per cent were regarded as the sociometric stars, those having 26 to 75 per cent were regarded as the average chosen and those having scores in the bottom 25 per cent were regarded as social isolates.

## **3.2.2 Scales Measuring Self Perception (SMS)**

### **3.2.2.1 Description**

Level of self-perception was measured by using Scales Measuring Self Perception developed by Agrawal (1991). It has two subscales namely Self Regard Scale and Self Acceptance Scale. The subscales when combined measure self-perception.

### **3.2.2.2 Self Regard Scale**

Self regard (Sr) measures affirmation of self because of worth or strength. It consists of 16 items. On each scale item two alternatives are given, out of which one has to be checked by the respondent.

### **3.2.2.3      Self Acceptance Scale**

Self acceptance (Sa) scale measures affirmation or acceptance of self, inspite of weakness or deficiencies. It consists of 26 items. On scale items the respondent has to check one of two alternatives provided to him. A high score on self acceptance scale measures acceptance of one's weaknesses or deficiencies. A low score indicates inability to accept one's weaknesses.

Items in Self Perception Scale were stated both positively and negatively. Thus, the particular continuum or endpoles of the dichotomy in question were made explicitly clear.

### **3.2.2.4      Psychometric Properties**

Validity : The author provides extensive evidence to prove the concurrent validity of the Self Perception Scale.

Reliability : Test-retest reliability of Self Perception Scale with two weeks interval was worked out. The reliability coefficient for Self Regard Scale was 0.63, for Self Acceptance Scale 0.79 and for total Self Perception Scale was 0.73.

### **3.2.2.5      Adoption of SMSP**

The items of SMSP were translated into Telugu, the regional language. Precaution was taken to retain the original meaning. Suggestions were taken from language expert regarding the necessary changes. These items were

administered to a sample of ten subjects to know the difficulties in answering the questions. Minor changes in language and sentence construction in some items were made with the experience gained. English and Telugu versions of Measure of Self Perception Scale were given in Annexure-iii and v respectively.

### **3.2.2.6 Pre Test**

SMSP was administered to 25 sociometric stars, 25 average chosen and 25 social isolates. The subjects were required to mark any one alternative of each item. Subjects were asked to mark every item without omitting any and no time limit was imposed.

### **3.2.2.7 Scoring**

The key for the scoring of 40 items was given in annexure-iv. Scores obtained by individual on Self Regard and Self Acceptance were added to yield a composite score on measure of self-perception.

## **3.2.3 Bell Adjustment Inventory Revised (1962) Student Form**

### **3.2.3.1 Description**

Adjustment was measured by using Bell Adjustment Inventory Revised (1962) Student Form developed by Bell (1962). The Bell Adjustment Inventory tries to obtain more reliable information from the individual concerning what he thinks and feels about his family relationships; his functioning body; his

friends and acquaintances outside the home, including how aggressive or retiring he is around them and how much he feels he can trust people; and finally, how well he has come to play the roles that society expects of him. The Inventory seeks to obtain information about how well the individual understands and has learned to live with his feelings and emotions. It endeavors to discover to what extent he is the master or the slave of his feelings. By asking questions about tension-arousing situations, it seeks to gain information about the extent of the individual's deviation from the group average in his personal and social relationships. The inventory provides six measures of personal and social adjustment.

Home adjustment : This measure includes 35 items relating to home environment and family relationships.

Health adjustment : This measure includes 35 items relating to health status of the individual.

Submissiveness-self assertion : This measure includes 35 items relating to social contacts, self confident and assertive.

Emotionality : It includes 35 items relating to emotional adjustment.

Hostility-friendliness : In this measure there are 30 items and the items relate to critical social relationships and about acceptance of people.

Masculinity-femininity : There are 30 items present in this measure. This includes items relating to masculine interests and feminine interests.

The measurement of six areas of adjustment permits location of specific adjustment difficulties. The total number of items present in this inventory are 200.

### **3.2.3.2      Psychometric Properties**

Validity : The author provides extensive evidence to prove the cross validational studies by correlating different measures of adjustments.

Reliability : The reliability was determined by correlating the odd-even items by Spearman coefficients of reliability. The coefficients of reliability for each of the six sections of the inventory are - for home adjustment 0.89, for health adjustment 0.80, for submissiveness-self assertion 0.89, for emotionality 0.85, for hostility-friendliness 0.83 and for masculinity-femininity 0.84.

### **3.2.3.3      Adoption of Bell Adjustment Inventory**

The items of Bell Adjustment Inventory were translated into Telugu, the regional vernacular language. The items were prepared with care and precaution to retain the original meaning. The language of items was checked

by language expert and necessary changes as suggested were made. These items were administered to a sample of ten subjects to know the difficulties in answering the questions. Minor changes in language and sentence construction of some items were made with the experience gained.

The final form of English and Telugu versions of Bell Adjustment Inventory were given in Annexure-vi and viii.

#### **3.2.3.4 Pre Test**

Bell Adjustment Inventory was administered to 25 sociometric stars, 25 average chosen and 25 social isolates. The subjects were requested to mark any one of the three categories (Yes, ?, No). Subjects were asked to mark every item without omitting any and no time limit was imposed.

#### **3.2.3.5 Scoring**

The correct answer carried the weight of '2' marks, question mark carried the weight of '1' mark and the wrong answer carried 'Zero'. The score of each of the six measures can be obtained separately. The lower the score, better the adjustment.

The key for the scoring of 200 items is given in annexure-vii.

- a. Home adjustment : Individuals scoring high tend to feel that their home relationships have been unsatisfactory. Low scores indicate satisfaction with regard to home adjustment.
- b. Health adjustment : High scores indicate unsatisfactory health adjustment; low scores indicate satisfactory adjustment.

- c. Submissiveness - self assertion : Individuals scoring high tend to be submissive and retiring in their social contacts. Individuals with low scores tend to be self confident and assertive.
- d. Emotionality : Individuals with high scores tend to be unstable emotionally; with low scores to be emotionally secure.
- e. Hostility - friendliness : Individuals with high scores tend to be hostile and critical in social relationships; with low scores, to be friendly and accepting of people.
- f. Masculinity-femininity : Females who score high tend to have strong masculine interests. Females who score low tend to have strong feminine interests. Males who score high tend to be strongly masculine in their interests. Males who score low tend to have the interests of females.

### **3.3 INTERVENTION STRATEGIES**

Three types of intervention strategies were designed for social isolates. One hundred and twenty five social isolates were divided into four groups. Peer oriented intervention strategy, parent oriented strategy and teacher oriented strategy were designed for first, second and third group of social isolates respectively. But all the three strategies together were planned to give for the fourth group. The intervention strategies planned for the social isolates were as follows

#### **3.3.1 Peer Oriented Intervention**

The intervention strategy planned for the first group of social isolates was divided into 4 subdivisions

## **Group discussion on**

- Meaning of friendship and its importance.
- Importance of having more friends.
- Drawbacks in not having any friends.
- How to help their friends when they were in need;
- What makes children acceptable to their peers

## **Encouraging social isolates**

- to share feelings and emotions with friends (Both happy and unhappy).
- to share past and present experiences with friends.
- to accept their friends as they were and to appreciate their styles.
- to share things and responsibilities with their friends
- not to hesitate to take assistance from their friends when in need.
- to welcome their friend's advices, judgements and opinions.
- not to pick out faults and not to notice unreasonability in the behaviour of their friends.
- talk about things that interest their peers.

- Peer pairing : In this sociometric star was paired with social isolate from the same class. Whatever activity sociometric stars were doing in the class, that may be reading, writing, playing etc., isolates also were asked to do the same activity.
- **The fourth subdivision includes playing with other children in groups**
  - playing with ball
  - Taking different chits containing different activities and doing them
  - Kho-kho game
  - Musical chairs
  - Group activities like singing, story telling, cracking jokes etc.

Duration : Each subdivision was lasting upto one hour and provided once a week. The whole training was provided for a period of 8 weeks.

### **3.3.2 Parent Oriented Strategy**

The intervention strategy designed for second group of social isolates was implemented through parents as mediators. Parents were given the following directions to follow for the development of their childrens' better social interactions.

The strategy was divided into 9 subdivisions and is as follows :

- Correction of annoying mannerisms that create an unfavourable impression : Parents should teach their children not to bring thumb, fingers, pencils or other objects in contact with the mouth and not to bite fingers.
- Improving Personal appearance : Parents should teach their children good way of dressing, good hair style and body neatness.
- Elimination of annoying behaviour : Grabbing, pushing, tattling, making derogatory comments, destroying another's property, throwing objects at another person, etc. may lead to social neglect. So, parents should make their children aware of what they are doing or saying to annoy others and help them correct their behaviour.
- Improving good manners : Parents should teach their children to follow good manners by saying sorry, thank you etc., and should tell them to enjoy others' company by talking something. They should initiate their children to wish elders, respect them and talk freely.
- Encouraging social movement : Parents should encourage their children to go out and mingle with others freely. Parents should make their children join institutions or organisations like Balabhavan, Hindusamaj, etc. Through them, they may get a chance of getting more friends with good tastes. They should take their children along with them to social gatherings.
- Assignment of responsibility : Parents should guide the child in developing habits of responsibility. Children should be given responsibility for household chores like taking care of siblings, etc. The child should be given greater freedom in selecting his friends. The parents should provide encouragement and a favourable setting for

desirable friends whom the child has chosen. The growing child needs greater freedom in spending money and in buying clothes or in doing shopping. The child should be made to realize that with freedom goes responsibilities.

- Respect for self and others : Parents should encourage their children to respect others, to be polite, courteous, and should encourage to listen to what others say. Children should be open to others, be friendly and be funny.
- Developing sense of belonging : Parents should encourage their children to strengthen their sense of belonging. They should teach their children to handle things like pen, pencil, books etc. carefully. Care should be taken to see that they don't tear papers from books.
- Increased self-insight : Parents should make the child to understand more fully why he has not been as well accepted as he would like. He will be motivated to acquire traits such as cheerfulness, cooperativeness, and conformity to social expectations and learning to look and act in a sex appropriate way. Parents should give freedom to their children to express their needs, desires, opinions and their positive and negative feelings. Parents should encourage their children to tell the truth, to be generous, to be honest and trust worthiness.

Duration : The whole training was provided over a period of two months. The investigator has visited parents once in a week and gave guidelines to them.

## **Teacher Oriented Strategy**

***"Education is the manifestation of the perfection already in man"***

**- Swami Vivekananda**

The intervention strategy designed for third group of social isolates was implemented through teachers as mediators.

### **Teachers are asked to**

- give more attention to social isolate children when the desired behaviour occurs and ignore disruptive behaviour.
- identify the skills and talents of social isolates and provide opportunities to demonstrate them.
- give more chances to social isolates to participate in class and more time to answer. If they fail to answer a question, ask the question again, giving clues and pressing the student to try again.
- smile more often and praise social isolates for their achievements
- provide more opportunities to play and work with other children in group projects.
- Increasing concentration

***"To me the very essence of education is concentration of mind, not the collecting of facts".***

**- Swami Vivekananda**

To increase the level of concentration children were given the following exercise. A simple recording sheet containing words from the lesson was given to social isolates. The subject is supposed to listen lesson taught carefully and put a tally mark in the recording sheet. For example the lesson planned to teach was respiratory system. The children were told to make a tally mark in the appropriate format supplied to them as soon as they heard the word 'Respiration'. The marks were totalled at the end of the session.

- Making to learn new words : Social isolates were made to write new words from the lesson that they never heard. Then they were made to readout those words loudly to tally the missing words. At the end of each session, social isolates were given home work to write those new words five times each.

Duration : This session was given for a period of one hour per week for eight weeks.

### **3.4 DATA COLLECTION**

Before collecting data the investigator established rapport with the subjects by means of informal talk. All the subjects were pre tested by using Scales Measuring Self Perception and Bell Adjustment Inventory. The subjects were seated spacially to avoid any discussion. Telugu versions of the tools were distributed among the subjects and the instructions were read out. They were also instructed to go through the printed instructions carefully. Subjects were asked to go through each item carefully and answer all of them.

After pre testing peer, parent, teacher and peer-parent-teacher oriented intervention strategies were implemented on four groups of social isolates. This programme was implemented on social isolates of four schools. For the first group of 50 social isolates, peer oriented intervention was implemented. All the social isolates were assembled and each session lasting one hour was provided to them once a week. Peer pairing was done with the help of teachers.

Second group of 25 social isolates received parent oriented intervention strategy. Before starting the intervention programme the investigator visited all the 25 homes and cooperation of the parents was secured. Parents were requested to assemble in the school and guidelines were given to them. Help of head masters and teachers was taken in arranging this meeting. Both the father and mother were requested to attend the meeting. After this initial meeting, the investigator visited the homes once in two weeks to give further guidelines and to discuss problems and progress with them.

For the third group of 25 social isolates teacher oriented intervention strategy was implemented. Class teachers and other teachers were involved in this programme. They were grouped and given guidelines to be followed. Investigator met the teachers once in two weeks for further discussions and to give guidelines.

The fourth group of 25 social isolates received all the above three strategies together. The whole training was provided over a period of 8 weeks. After a gap of four weeks all the subjects i.e. sociometric stars, average chosen and social isolates were post tested by using Scales Measuring Self Perception and Bell Adjustment Inventory.

### **3.6 STATISTICAL ANALYSIS**

The statistical techniques applied in the study are :

- Measures of central tendency and dispersion were computed to examine the normality of the distribution.
- t-test was used to know the significant difference in the self-perception, adjustment scores among sociometric stars, average chosen and social isolates. t-test was used to know the significant difference between pre and post test scores of self-perception and adjustment among different sociometric status groups.. The usual levels of significance, viz., 0.05, 0.01 and 0.001 were employed to test the significance of the obtained values.
- The obtained numerical results were also adumbrated by graphical representation wherever necessary.

*Chapter - 4*

**RESULTS AND  
DISCUSSION**

## **RESULTS AND DISCUSSION**

The results obtained in this study were presented in 12 sections. The data collected was consolidated, analysed, presented and discussed along the following sections keeping in view the objectives of the study.

- 4.1. Description of Self Perception Scores
- 4.2. Self Perception Levels of Sociometric Stars, Average Chosen and Social Isolates.
- 4.3 Comparison of Self Perception Scores of Sociometric Stars, Average Chosen and Social Isolates.
- 4.4 Comparison of Pre Test and Post Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Self Perception.
- 4.5 Pre and Post Test Scores of Social Isolate Groups on Self Perception.
- 4.6 Comparison of Pre Test and Post Test Self Perception Scores of Different Groups of Social Isolates with Average Chosen and Sociometric Stars.
- 4.7 Description of Adjustment Scores.
- 4.8 Adjustment Levels of Sociometric Stars, Average Chosen and Social Isolates.
- 4.9 Comparison of Adjustment Scores of Sociometric Stars, Average Chosen and Social Isolates.

- 4.10 Comparison of Pre Test and Post Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Adjustment.
- 4.11 Pre and Post Test Scores of Social Isolate Groups on Adjustment.
- 4.12 Comparison of Pre Test and Post Test Adjustment Scores of Different Groups of Social Isolates with Average Chosen and Sociometric Stars.

#### **4.1 DESCRIPTION OF SELF PERCEPTION SCORES**

The Measures of Self Perception Scale is interpretation of Self Regard Scale and Self Acceptance Scale with 40 items, with the score of one mark for each item for correct answer.

On the basis of the individual total score, subjects were statistically distributed.

##### **4.1.1 Description of Pre Test Scores of Sociometric Stars on Self Perception**

The mean pre test score of sociometric stars on self-perception was 27.59. The values of other measures of central tendency viz., median and mode were 28.00 and 28.82 respectively. The ascending order of the values of mean, median and mode reveals that there exists a negative skewness in the distribution of scores.

"In a negatively skewed curve or distribution the arithmetic mean is smaller than the median and mode and also the median is smaller than the mode". In a negatively skewed curve the relationship of the central tendencies is generally expressed as : Mean < Median < Mode.

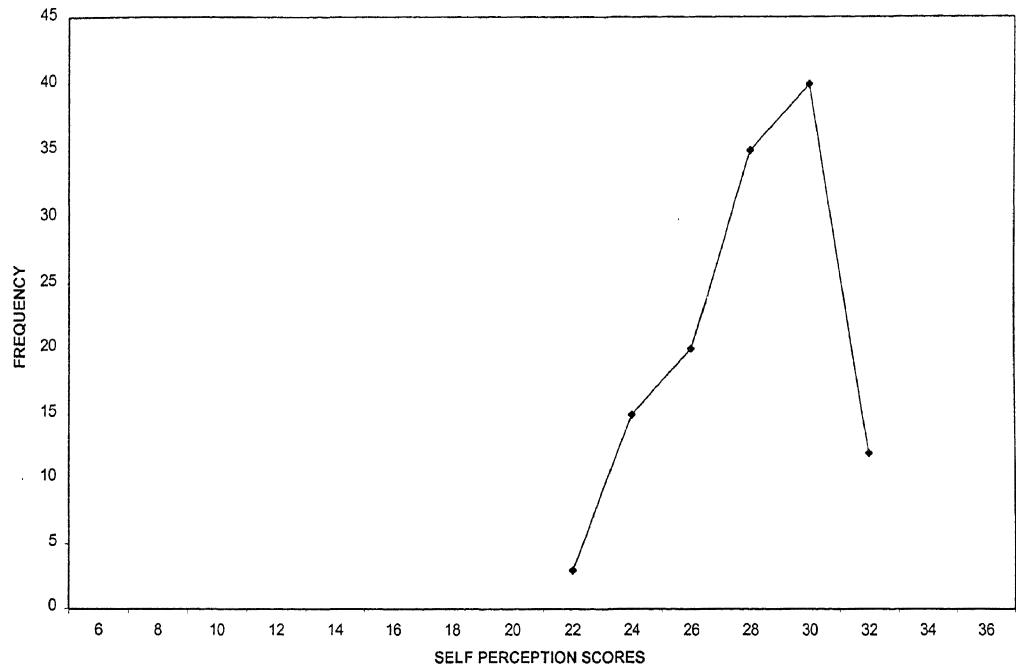
Measures of central tendency showed that the frequency distribution was symmetrical as the empirical relationship Mean - Mode = 3 (Mean-Median) was within the acceptable approximation.

The measures of dispersion, namely range (12.00), quartile deviation (1.50) and standard deviation (2.47) disclose that the distribution of scores was almost normal as the empirical relationship between Q.D and S.D. (Q.D. = 2/3 S.D.) was within the acceptable approximation. The Kurtosis of the distribution was 3.19 which reveals that the distribution of scores was Mesokurtic. Graphical representation of the pre test scores of sociometric stars on self-perception was represented in Figure 2.

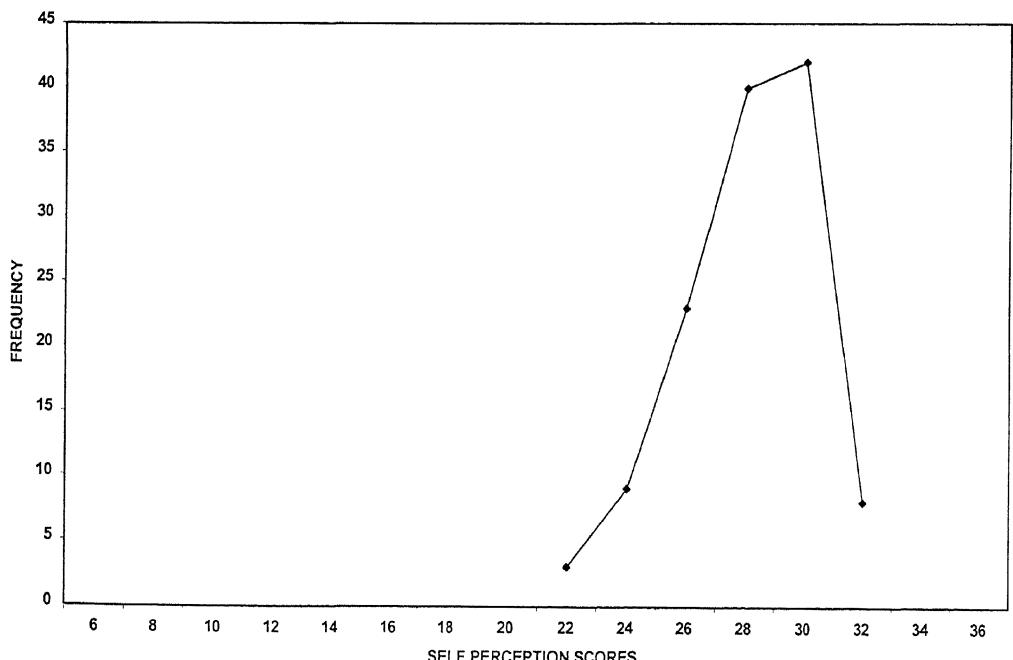
#### **4.1.2 Description of Post Test Scores of Sociometric Stars on Self Perception**

The mean post test score of sociometric stars on self-perception was 27.71. The values of other measures of central tendency viz., median and mode were 28.00 and 28.58 respectively. The ascending order of the values of mean, median and mode reveals that there exists a negative skewness in the distribution of scores. The measures of central tendency show that the frequency distribution was symmetrical as the empirical relationship i.e., Mean-Mode = 3 (Mean - Median) was within the acceptable approximation.

**PRE TEST**



**POST TEST**



**Fig. 2. Pre Test and Post Test Scores of Sociometric Stars on Self Perception**

The measures of dispersion, namely range (10.00), quartile deviation (1.50) and standard deviation (2.24) disclose that the distribution of scores was almost normal as the empirical relationship between Q.D. and S.D. ( $Q.D.= 2/3 S.D.$ ) was within the acceptable approximation. The kurtosis of the distribution was 2.92 which reveals that the distribution of scores was platykurtic.

Graphical representation of the post test scores of sociometric stars on self-perception were represented in Figure 2. Only slight change was found between pre test and post test scores of sociometric stars on self-perception. It can be seen that in post test majority of the sociometric stars were in the range of 28 to 30. Both in pre test and post test the scores of the sociometric stars were in the range of 22 to 32. This reveals that there was no change between pre test and post test scores of sociometric stars, because sociometric stars were not provided with any intervention.

#### **4.1.3 Description of Pre Test Scores of Average Chosen on Self Perception**

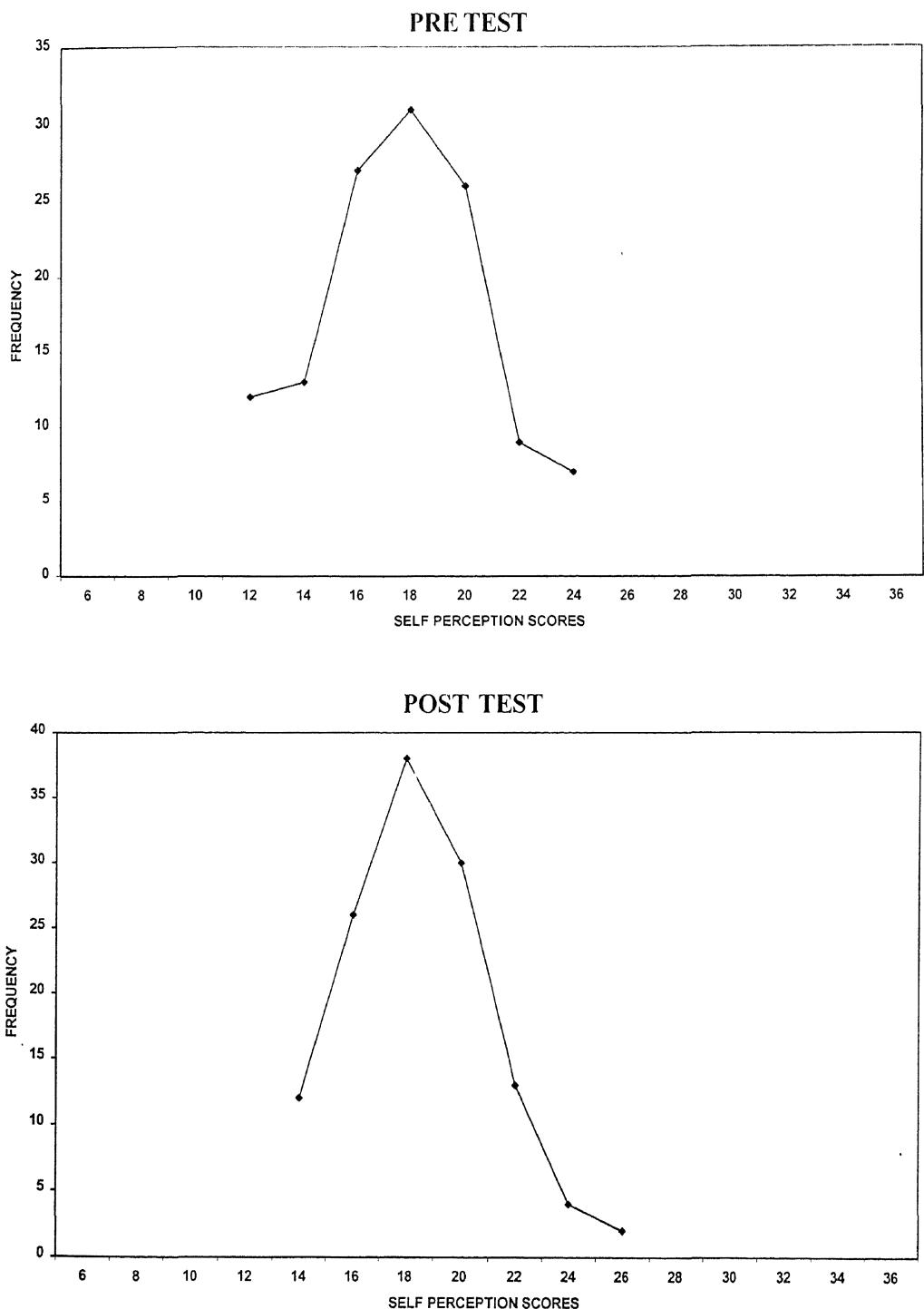
For the pre test scores of average chosen on self-perception the values of measures of central tendency viz., mean, median and mode were 17.13, 17.00 and 16.74 respectively. The descending order of the values of mean, median and mode reveals that there exists a positive skewness in the distribution of scores. Measures of central tendency show that the frequency distribution was symmetrical as the empirical relationship i.e., Mean-Mode = 3 (Mean - Median) was within the acceptable approximation.

The measures of dispersion, namely range (13.00), quartile deviation (2.00) and standard deviation (3.06) disclose that the distribution of scores was almost normal as the empirical relationship between Q.D. and S.D. ( $Q.D. = 2/3 S.D.$ ) was within the acceptable approximation. The Kurtosis of the distribution was 2.61 which reveals that the distribution of scores was platykurtic. Graphical representation of the pre test scores of average chosen on self-perception was represented in Figure 3.

#### **4.1.4 Description of Post Test Scores of Average Chosen on Self Perception**

Mean, median and mode values of post test scores of average chosen on self-perception were 17.94, 18.00 and 18.13 respectively. The ascending order of the values of mean, median and mode reveals that there exists a negative skewness in the distribution of scores. Measures of central tendency show that the frequency distribution was asymmetrical as the empirical relationship i.e.,  $Mean - Mode = 3$  ( $Mean - Median$ ) was not within the acceptable approximation.

The measures of dispersion, namely range, quartile deviation and standard deviation were 14.00, 2.00 and 2.65 respectively. The value of quartile deviation (2.00) was greater than the value of  $2/3 S.D.$  (1.77). The Kurtosis of the distribution was 3.09 which reveals that the distribution of scores was mesokurtic. Graphical representation of the post test scores of average chosen on self-perception was represented in Figure 3.



**Fig. 3. Pre Test and Post Test Scores of Average Chosen on Self Perception**

It was evident from fig.3 that self-perception scores of majority of the average chosen both in pre test and post test were between the class-interval of 16 and 18. In pre test the scores of average chosen were within the range of 10 to 24 whereas in post test there was slight change and the range increased from 12 to 26. Not much difference was found between pre test and post test scores of average chosen on self perception. The slight change found might be due to environmental factors even though they were kept as controls.

#### **4.1.5 Description of Pre Test Scores of Social Isolates on Self Perception**

For the pre test scores of social isolates on self-perception the values of measures of central tendency viz., mean, median and mode were 11.54, 11.00 and 9.91 respectively. The descending order of the values of mean, median and mode reveals that there exists a positive skewness in the distribution of scores. Measures of central tendency show that the frequency distribution was asymmetrical as the empirical relationship i.e., Mean - Mode = 3 (Mean-Median) was not within the acceptable approximation.

In positive skewness, the arithmetic mean has the highest value followed by the median and mode respectively. Thus, in a positively skewed distribution, the positions of these measures may be pointed out as : Mean > Median > Mode.

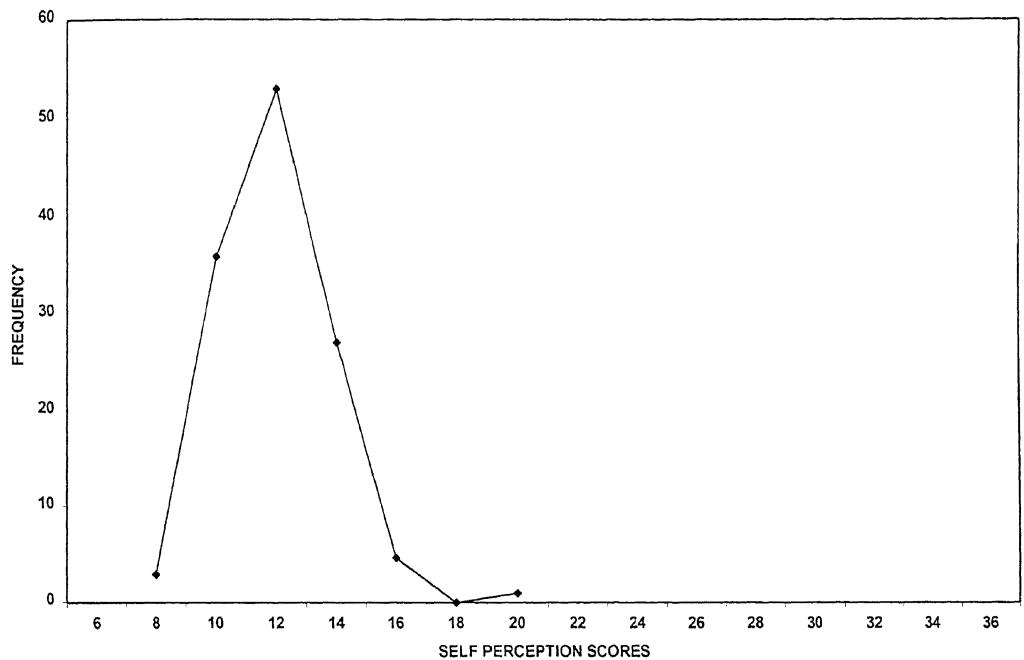
The values of measures of dispersion range, quartile deviation and standard deviation were 11.00, 1.50 and 1.83 respectively. This disclose that the distribution of scores was not normal as the empirical relationship between Q.D. and S.D. ( $Q.D. = 2/3 S.D.$ ) was not within the acceptable approximation. The value of quartile deviation (1.50) was greater than the value of  $2/3 S.D$  (1.22). The Kurtosis of the distribution was 3.97 which reveals that the distribution of scores was leptokurtic. Graphical representation of the scores of social isolates was represented in Figure 4.

#### **4.1.6 Description of Post Test Scores of Social Isolates on Self Perception**

The mean post test score of social isolates on self-perception was 21.78. The values of other measures of central tendency viz., median and mode were 20.00 and 16.45 respectively. The descending order of the values of mean, median and mode reveals that there exists a positive skewness in the distribution of scores. Measures of central tendency show that the frequency distribution was asymmetrical as the empirical relationship i.e., Mean - Mode = 3 (Mean - Median) was not within the acceptable approximation.

The measures of dispersion, namely range (24.00), quartile deviation (4.00) and standard deviation (5.45) show that the distribution of scores was not normal as the empirical relationship between Q.D. and S.D. ( $Q.D. = 2/3 S.D.$ ) was not within the acceptable approximation. The value of Q.D. (4.00) was greater than the value of  $2/3 S.D$  (3.63). The Kurtosis of the distribution was 2.67 which reveals that the distribution of scores was platykurtic. Graphical representation of the scores of social isolates in post test was represented in Figure.4.

### PRE TEST



### POST TEST

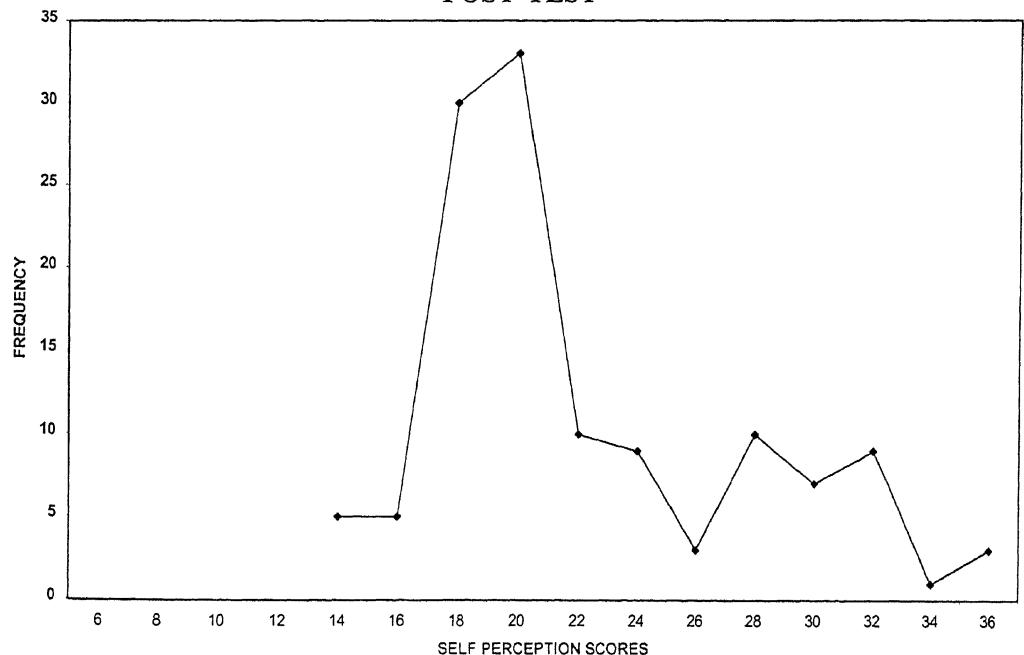


Fig. 4. Pre Test and Post Test Scores of Social Isolates on Self Perception

From the graphical representation of self-perception scores of social isolates, it was evident that most of the social isolates in pre test were in the class-interval of 10 to 12. Whereas in post test majority of them were in the class-interval of 18 to 20. Almost all the social isolates in pre test were within the range of 6 to 20. Whereas in post test the lowest self-perception score was increased to 12 and the highest self-perception score was progressed to 36. This advancement in mean scores of social isolates was due to implementation of peer, parent and teacher oriented intervention strategies to social isolates.

#### **4.2 SELF PERCEPTION LEVELS OF SOCIOMETRIC STARS, AVERAGE CHOSEN AND SOCIAL ISOLATES**

In the manual the author recommended the use of mean self acceptance, self regard and self-perception scores. To get a better understanding of the subject's position in each of the component, subjects were divided into very high, high, average, low and very low categories on the basis of their scores. Mean plus or minus 1 SD was taken as a cut off point. The mean plus 2 SD gives the very high score value, mean plus 1 SD gives the high score, mean gives average score, mean minus 1 SD gives low score and mean minus 2 SD gives very low score value. Table 3 shows the classification of scores into very high, high, average, low and very low categories.

Self Acceptance Scale measures acceptance of self, inspite of weaknesses or deficiencies. A high score on Self Acceptance Scale measures acceptance of one's own weaknesses or deficiencies. A low score indicates inability to accept one's weaknesses.

**Table 3. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Self Acceptance Scores in Pre Test**

Level of Self Acceptance	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very High	5	4	1	0.8	0	0
High	83	66.4	0	0	0	0
Average	34	27.2	12	9.6	0	0
Low	3	2.4	104	83.2	82	65.6
Very Low	0	0	8	6.4	43	34.4

Children who are self acceptant, accept themselves. When they like themselves reasonably well, they behave in a manner that leads to social acceptance. Distribution of sociometric stars, average chosen and social isolates on pre test scores of self acceptance were presented in table 3. Majority of the sociometric stars (66.4%) had high level of self acceptance. Nearly 83 per cent of the average chosen had low level of self acceptance. Almost all the social isolates had low (65.6%) and very low (34.4%) levels of self acceptance.

The low self acceptance of social isolates may be due to the way children were treated by people who were significant to them. In an earlier study **Feinberg (1953)** found that young persons who were accepted by others had on the whole, a more favourable view of themselves than the isolated ones. Similarly in a recent study by **Patterson *et al* (1990)**, results showed relationship between childrens' reports about their own competence

and their views of important relationships with others as a function of sociometric status. Because of the importance of social acceptance to good personal and social adjustments attempts should be made to counteract the low self acceptance that is so common among social isolates.

**Table 4. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Self Acceptance Scores in Post Test**

Level of Self Acceptance	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very High	6	4.8	0	0	13	10.4
High	80	64	1	0.8	17	13.6
Average	37	29.6	19	15.2	39	31.2
Low	2	1.6	101	80.8	55	44
Very Low	0	0	4	3.2	1	0.8

Table 4 shows distribution of sociometric stars, average chosen and social isolates as per their self acceptance scores in post test. It can be seen from the table 4 that there were not much changes among sociometric stars and average chosen on levels of self acceptance in post test. However after receiving the intervention programme there was a positive change in the self acceptance levels of social isolates. In pre test none of the social isolates had average, high or very high levels of self acceptance. Whereas in post test after intervention 10.4 per cent had very high, 13.6 per cent had high and 31.2 per cent had average levels of self acceptance. In pre test 34.4 per cent of social isolates had very low level of self acceptance. Whereas in post test only one had very low level of self acceptance.

Self Regard measures affirmation of self because of worth or strength.

Table 5 shows distribution of sociometric stars, average chosen and social isolates as per their self regard scores in pre test.

**Table 5. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Self Regard Scores in Pre Test**

Level of Self Regard	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very High	10	8	0	0	0	0
High	66	52.8	1	0.8	0	0
Average	49	39.2	60	48	1	0.8
Low	0	0	64	51.2	91	72.8
Very Low	0	0	0	0	33	26.4

On self regard none of the sociometric stars were in the category of low and very low levels. Majority of them (52.8%) had high self regard. Majority of the average chosen had average level (48%) and low levels (51.2%) of self regard. Whereas 73 per cent of the social isolates had low level and 26 per cent had very low levels of self regard.

**Table 6. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Self Regard Scores in Post Test**

Level of Self Regard	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very High	8	6.4	0	0	3	2.4
High	73	58.4	4	3.2	23	18.4
Average	44	35.2	72	57.6	60	48
Low	0	0	49	39.2	39	31.2
Very Low	0	0	0	0	0	0

Table 6 shows distribution of sociometric stars, average chosen and social isolates as per their self regard scores in post test. It can be seen from the table that the same trend was observed in the post test scores of self regard as in the post test scores of self acceptance. There was not much change in the positions of sociometric stars and average chosen in their levels of self regard. However positive changes were observed in the levels of social isolates. In pre test none of the social isolates had very high and high levels of self regard. Whereas in post test 24 per cent had very high level, and 18.4 per cent had high level of self regard. In post test none of the social isolates were in the category of very low.

Paired interpretation of scales measuring self acceptance and self regard may be considered to reflect the general area of self-perception. Self-perception is an individual's interpretation of himself. A strong self-perception helps children believe in and rely on themselves. Table 7 shows distribution of sociometric stars, average chosen and social isolates as per their self perception scores in pre test.

**Table 7. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Self Perception Scores in Pre Test**

Level of Self Perception	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very High	0	0	0	0	0	0
High	108	82.4	0	0	0	0
Average	22	17.6	42	33.6	1	0.8
Low	0	0	83	66.4	85	68
Very Low	0	0	0	0	39	31.2

**Coopersmith (1967)** observed that people develop self-perceptions according to 4 bases: significance (the way they feel they are loved and approved of by people important to them), competence (in performing tasks they consider important), virtue (attainment of moral and ethical standards) and power (the extent to which they influence their own and others' lives).

All the sociometric stars were in the category of high (82.4%) and average (17.6%) levels of self-perception.

**Dodge *et al.* (1989)** observed that children who are friendly and self confident win more friends. As their popularity increases their self assurance and leadership qualities also grow and they develop positive self-perceptions.

None of the sociometric stars had very high, low and very low levels of self-perception. Similar results were reported by **Reese (1961)** that sociometric stars think moderately well of themselves rather than showing extremely high or low levels of self-perception.

**Cook, Goldman and Olczak (1978)** opined that high self-perception is more likely to lead acceptance to peers than very high or very low self-perception. Exaggerated reports of self may be inaccurate; in addition, children who say they are wonderful may be perceived as arrogant and thus turn others away.

Nearly 34 per cent of average chosen had average levels of self-perception and 66 per cent had low levels of self-perception. Whereas 68 per cent of social isolates had low level and 31.2 per cent had very low levels of self-perception. **Cohen, Reinherz and Frost (1994)** showed that feelings of social isolation were associated with low self-perception.

**Table 8. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Self Perception Scores in Post Test**

Level of Self Perception	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very High	0	0	0	0	4	3.2
High	104	83.2	1	0.8	28	22.4
Average	21	16.8	48	38.4	53	42.4
Low	0	0	76	60.8	40	32
Very Low	0	0	0	0	0	0

Table 8 shows distribution of sociometric stars, average chosen and social isolates as per their self-perception scores in post test. Being able and willing to appraise themselves realistically, recognising and accepting their weaknesses as well as their strengths increase self-perception. In pre test none of the social isolates secured very high and high levels of self-perception. After intervention 3.2 per cent of social isolates had very high, 22% had high and 42% had average levels of self-perception. This positive change in the levels of self-perception can be attributed to the intervention programme.

#### **4.3 COMPARISON OF SELF PERCEPTION SCORES OF SOCIO METRIC STARS, AVERAGE CHOSEN AND SOCIAL ISOLATES**

Scales measuring self-perception were administered to sociometric stars, average chosen and social isolates both before and after implementation of intervention strategies. In this section, self-perception scores of socio-metric stars, average chosen and social isolates were presented.

#### **4.3.1. Pre Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Self Perception**

The mean pre test score of sociometric stars, average chosen and social isolates on self-perception were presented in Table 9.

In a study **Chambblis et al.** (1978) found positive relationship between self-concept and peer acceptance. In the present study, the maximum possible score on self-perception was 42. It can be seen that the mean score of sociometric stars in pre test was 27.59. It was higher than the average score and it indicates that the sociometric stars were able to accept their weaknesses and deficiencies.

**Chetanapati and Jaya (1997)** found positive relationship between social preference score and self-concept score of both sociometric stars and isolate children. Similar results were reported in the present study. The subjects who were high in social status scored high in self-perception.

The mean self-perception scores of average chosen in pre test was 17.13. This score indicate that average chosen were unable to accept their weaknesses and deficiencies.

In pre test the mean scores of social isolates on self acceptance, self regard and self-perception were 7.54, 4.00 and 11.54 respectively. These scores were significantly lesser than mean scores of sociometric stars and average chosen. The mean scores of social isolates show their inability to accept their weaknesses or deficiencies.

**Table 9. Pre Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Self Acceptance, Self Regard and Self Perception**

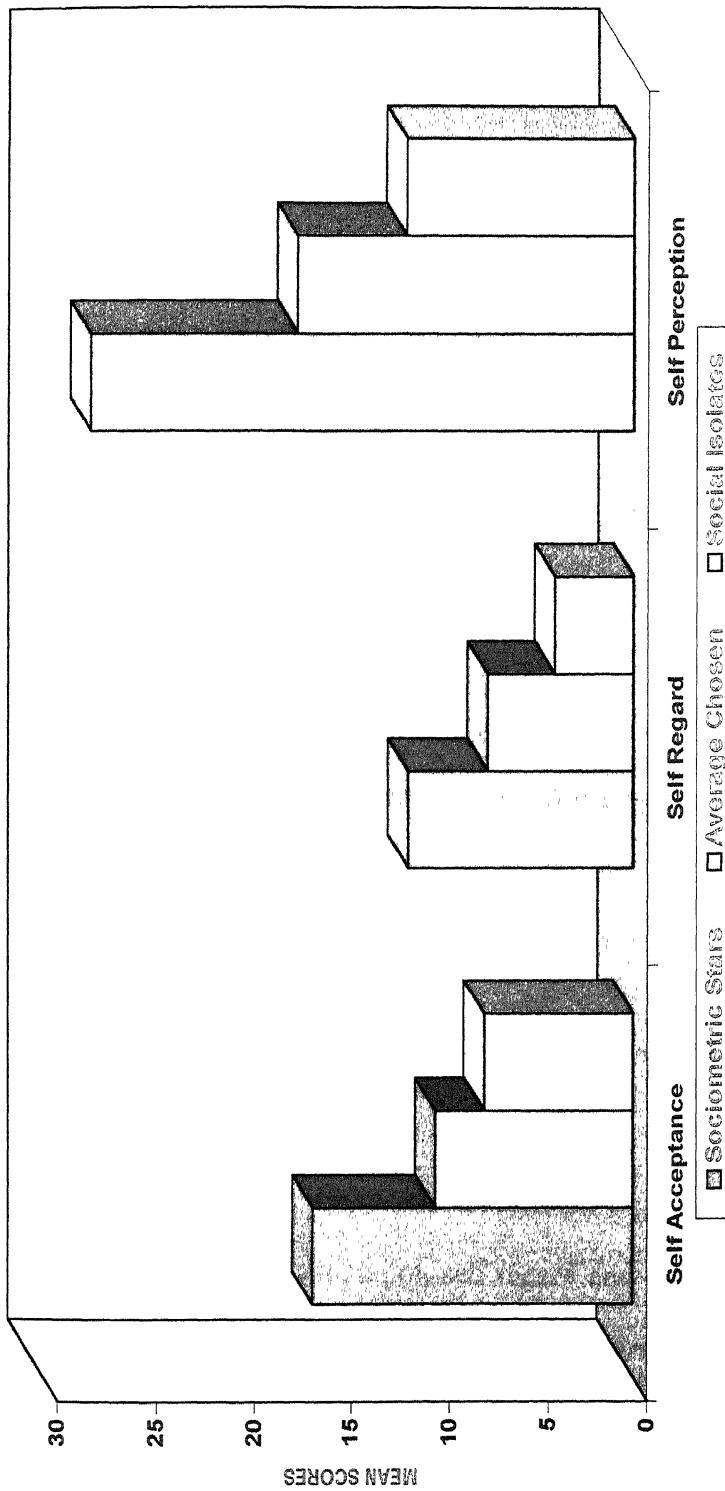
S. No.	Sociometric groups	Self Acceptance		Self Regard		Self Perception	
		Mean	S.D.	Mean	S.D.	Mean	S.D.
1.	Sociometric Stars (N=125)	16.26	2.24	11.38	1.41	27.59	2.48
2.	Average Chosen (N=125)	10.00	3.20	7.37	1.87	17.13	3.07
3.	Social Isolates (N=125)	7.54	1.83	4.00	0.95	11.54	1.83
		1 Vs 2		17.89***		19.12***	
		1 Vs 3		33.54***		48.55***	
		2 Vs 3		7.46***		17.95***	
t-values							

Thus the data indicate that it is the subjects with high self-perception who tend to be socially successful. It may be contended that subjects with high self-perception will readily make friends compared with subjects with medium and low self-perception. The results shows that there was association between self-perception and sociometric choice status of individuals.

It was evident that in pre test, there were significant differences between sociometric stars and average chosen on self acceptance, self regard and self-perception scores at 0.001 level of significance. Sociometric stars had better self acceptance, self regard and self-perception than average chosen.

The self-accepting person evaluates himself realistically, and so he can use his capacities effectively. **Reese (1961)** reported that sociometric stars think moderately well of themselves. In the present study also sociometric stars secured higher self-perception scores than average chosen and social isolates. The results of the present study were inline with the Reese's study.

From the table 9 it was clear that in pre test, there were significant differences between sociometric stars and social isolates on self acceptance, self regard and self-perception scores at 0.001 level of significance. According to **Goslin (1962)** social isolates overestimate their popularity. **Crick and Ladd (1988)** have observed greater loneliness among isolate children and reported an association between low peer status and low self-concept.



**Fig.5. Pre Test Scores of Sociometric Status Groups on Self Acceptance, Self Regard and Self Perception**

Significant differences were observed between average chosen and social isolates in pre test scores of self acceptance, self regard and self perception at 0.001 level of significance. **La Gaipa and Wood (1973)** showed that social isolate children who were socially withdrawn differed from the average chosen in the concepts they had about friendship and they appeared to be behind in social development as a result of decreased contacts consequent on the lack of usual friendship expectancies. **La Gaipa and Irwin (1976)** also reported similar results.

Sociometric stars secured higher mean self-perception scores as compared to average chosen. It was evident from the table that average chosen secured lower mean score than sociometric stars and higher mean score than social isolates. Social isolates secured lower mean self-perception scores than average chosen and sociometric stars. From this study it was revealed that low social status leads to low self-perception and high social status leads to high self-perception. So social isolates should be given intervention in order to improve their self-perception scores.

#### **4.3.2 Post Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Self Perception**

The mean post test scores of sociometric stars, average chosen and social isolates on self acceptance, self regard and self-perception were presented in table 10. As in pre test sociometric stars and social isolates differed significantly at 0.001 level of significance on self acceptance, self regard and self-perception. The mean scores of social isolates on self

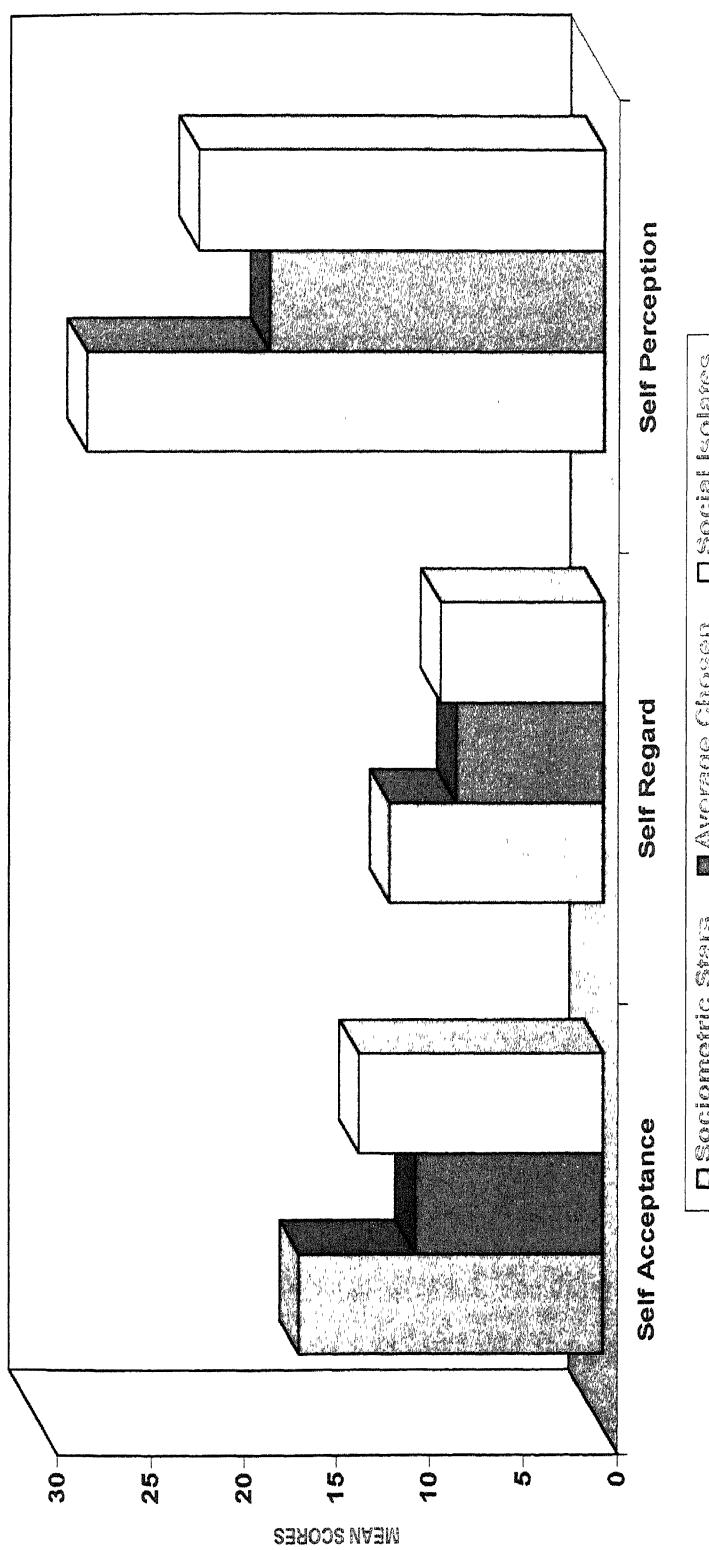
acceptance, self regard and self-perception showed improvement after intervention in post test. However inspite of these improvements, the mean scores of social isolates were significantly lesser than sociometric stars indicating lower self-acceptance, self regard and self-perception than sociometric stars.

Whereas in post test significant differences at 0.001 level were observed between average chosen and social isolates on self acceptance, self regard and self-perception. In the pre test also significant differences at 0.001 level were observed between average chosen and social isolates on self acceptance, self regard and self-perception. But in pre test average chosen obtained higher mean scores compared to social isolates. In post test social isolates obtained significantly higher mean scores on self acceptance, self regard and self-perception than average chosen. This can be attributed to the intervention programme given to the social isolates. As average chosen were not given any intervention programme, there were not much changes in their mean scores on self acceptance, self regard and self-perception.

After intervention social isolates showed marked improvement and they obtained higher mean scores than average chosen. Similar results were reported in intervention conducted by **Oden and Asher, 1977; Shantz, 1983** that socially isolated children gained greater acceptance after they had participated in practice of social skills.

**Table 10. Post Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Self Acceptance, Self Regard and Self Perception.**

S. No.	Sociometric groups	Self Acceptance		Self Regard		Self Perception	
		Mean	S.D.	Mean	S.D.	Mean	S.D.
1.	Sociometric Stars (N=125)	16.29	1.82	11.42	1.34	27.71	2.25
2.	Average Chosen (N=125)	10.01	1.56	7.87	1.69	17.94	2.66
3.	Social Isolates (N=125)	13.05	3.69	8.73	2.29	21.78	5.47
t-values		29.07*** 8.76*** 8.44***		93.42*** 11.26*** 3.37***		31.31*** 11.19*** 6.98***	



**Fig. 6. Post Test Scores of Sociometric Status Groups on Self Acceptance, Self Regard and Self Perception**

#### **4.4 COMPARISON OF PRE TEST AND POST TEST SCORES OF SOCIO METRIC STARS, AVERAGE CHOSEN AND SOCIAL ISOLATES ON SELF PERCEPTION**

The mean pre test and post test scores of sociometric stars, average chosen and social isolates on self-perception were presented in table 11. It can be seen that there were no significant differences between pre test and post test scores of sociometric stars on self acceptance, self regard and self perception.

Among average chosen there was no significant difference between pre test and post test scores on self acceptance. However slight improvement was observed in mean scores of self regard (0.50) and self-perception (0.81). The differences between post test and pre test mean scores on self regard and self perception were significant at 0.01 level. This might be due to the influence of environmental factors.

The mean pre test scores of social isolates on self acceptance, self regard and self-perception were 7.54, 4.00 and 11.54 respectively. After implementation of intervention in post test the obtained mean values were 13.05, 8.73 and 21.78 for self acceptance, self regard and self-perception respectively. The differences between pre test and post test scores were significant at 0.001 level.

In post test the mean scores of social isolates on self acceptance, self regard and self-perception were progressed. The differences between pre test and post test mean scores were 5.51, 4.73 and 10.24 for self acceptance, self regard and self-perception respectively. This significant improvement in post test scores of social isolates can be attributed to the intervention strategies implemented on social isolates.

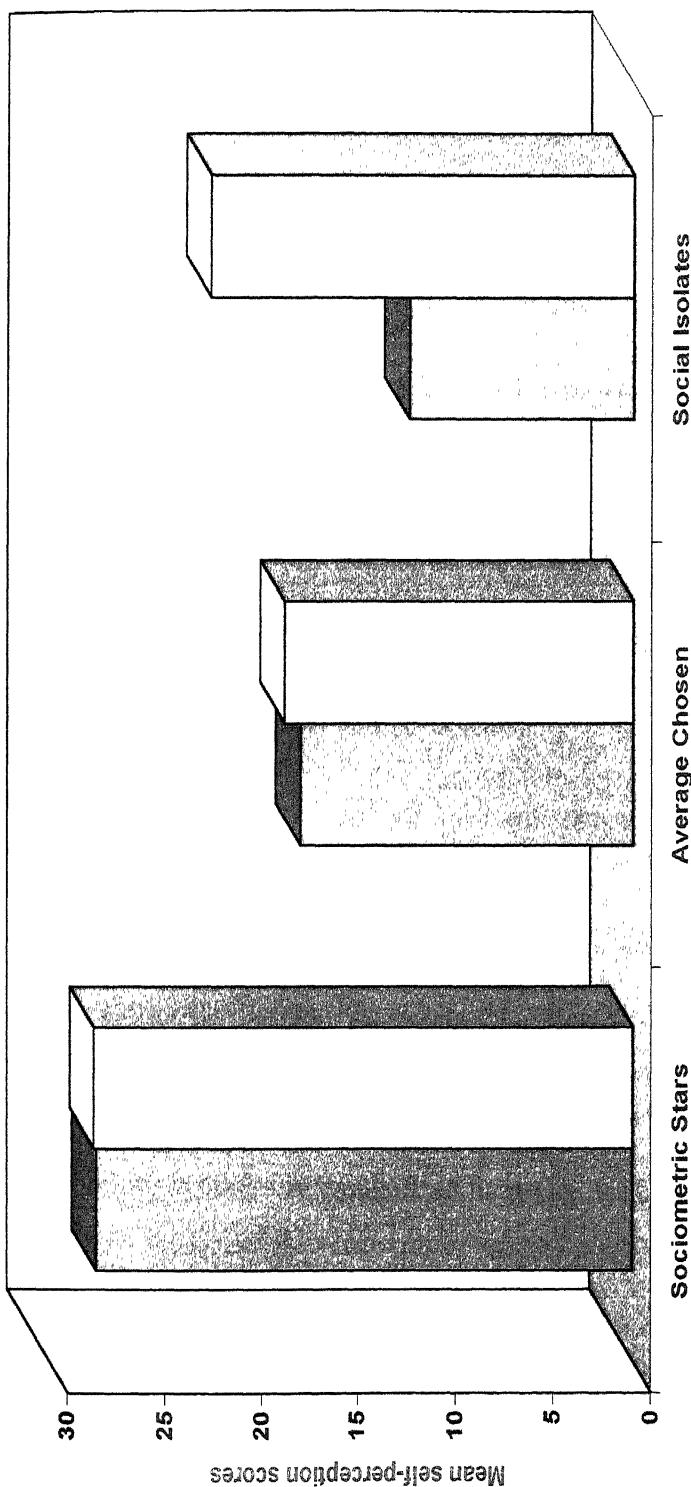
**Table 11. Pre and Post Test Scores of Sociometric Status Groups on Self Acceptance, Self Regard and Self Perception**

Sociometric Groups	Measure	N	Pre Test		Post Test		Difference in Mean values	t-values
			Mean	S.D.	Mean	S.D.		
Sociometric Stars	Self Acceptance	125	16.26	2.24	16.29	1.82	0.03	0.16@
	Self Regard		11.38	1.41	11.42	1.34	0.04	0.28@
	Self Perception		27.59	2.48	27.71	2.25	0.12	0.59@
Average Chosen	Self Acceptance	125	10.00	3.20	10.01	1.56	0.01	0.22@
	Self Regard		7.37	1.87	7.87	1.69	0.50	2.95**
	Self Perception		17.13	3.07	17.94	2.66	0.81	3.27**
Social Isolates	Self Acceptance	125	7.54	1.83	13.05	3.69	5.51	15.4***
	Self Regard		4.00	0.95	8.73	2.29	4.73	20.93***
	Self Perception		11.54	1.83	21.78	5.47	10.24	19.78***

@ Not significant

\*\* Significant at 0.01 level of significance

\*\*\* Significant at 0.001 level of significance



**Fig. 7. Pre and Post Test of Scores Sociometric Status Groups on Self Perception**

#### **4.5 PRE AND POST TEST SCORES OF SOCIAL ISOLATE GROUPS ON SELF PERCEPTION**

Three types of intervention strategies were designed for social isolates. One hundred and twenty five (125) isolates were divided into four groups. Peer oriented intervention strategy, parent oriented intervention strategy and teacher oriented intervention strategy were designed and implemented for first, second and third group of social isolates respectively. All the three strategies together were implemented to fourth group of social isolates. The intervention was given for a period of 8 weeks. Sociometric stars and average chosen were not given any intervention during this period. Table 12 indicates the results of pre and post intervention scores of four social isolate groups on self acceptance, self regard and self-perception.

Peers contribute in unique and major ways to the shaping of a child's personality, social behaviour, values, and attitudes. Children influence one another by acting as models, reinforcing or punishing behaviour, and interpreting behaviour. Much of the child's understanding of social behaviour and how to relate to others is transmitted by peers, not by adults (**Mussen et al, 1990**).

Peer accepted children are considered helpful, friendly, cooperative and cheerful etc. Shy, quiet children lacking social involvement are often isolated.

**Parker and Asher (1988)** showed that low accepted children reported less supportive relationships with friends. Because children who are sociometric stars, have more opportunity to participate in peer group activities than social isolates, they have opportunities to learn social skills. As a result they become socially more competent than social isolates. As **Gottman et al. (1975)** have stressed sociometric stars are more knowledgeable about how to make friends. This adds to their social acceptance and in turn has a favourable effect on their self-perception (**Hurlock, 1986**).

According to **Shure and Spivak (1980)** isolated children can be coached in the kinds of skills that are effective in establishing better social relationships.

In order to improve social skills of social isolates peer oriented intervention strategy was designed and implemented on the first group of social isolates.

It can be seen from table 12 that there were significant differences between pre test and post test scores of peer oriented group of social isolates on self-acceptance, self regard and self-perception at 0.001 level of significance.

The activities included in peer-oriented intervention strategy were discussion about importance of friendship; encouraging to share feelings, emotions, past and present experiences, things and responsibilities etc. Games like Kho-kho, musical chairs were also conducted to provide an opportunity to mingle with other children.

**Table 12. Pre and Post Test Scores of Social Isolate Groups on Self Acceptance, Self Regard and Self Perception**

Social Isolate Groups	Measure	N	Pre Test		Post Test		Diff. in Mean values	t-values
			Mean	S.D.	Mean	S.D.		
First (Peer Oriented Strategy)	Self Acceptance	50	7.64	1.68	10.82	1.59	3.18	10.05***
	Self Regard		3.90	0.79	7.34	1.49	3.44	14.48***
	Self Perception		11.54	1.50	18.16	2.62	6.62	15.18***
Second (Parent Oriented Strategy)	Self Acceptance	25	7.08	1.66	11.56	2.50	4.48	9.01***
	Self Regard		4.28	0.74	7.72	1.46	3.44	11.24***
	Self Perception		11.36	1.63	19.28	3.20	7.92	11.99***
Third (Teacher Oriented Strategy)	Self Acceptance	25	8.12	1.90	13.20	2.35	5.08	10.68***
	Self Regard		4.20	1.29	9.68	1.28	5.48	14.46***
	Self Perception		12.36	2.40	22.88	3.10	10.52	16.98***
Fourth (Peer-Parent- Teacher Oriented Strategy)	Self Acceptance	25	7.20	2.14	18.84	2.40	11.64	19.50***
	Self Regard		3.72	0.98	11.56	2.12	7.84	16.89***
	Self Perception		10.92	1.78	30.40	2.89	19.48	29.35***

\*\*\* Significant at 0.001 level of significance

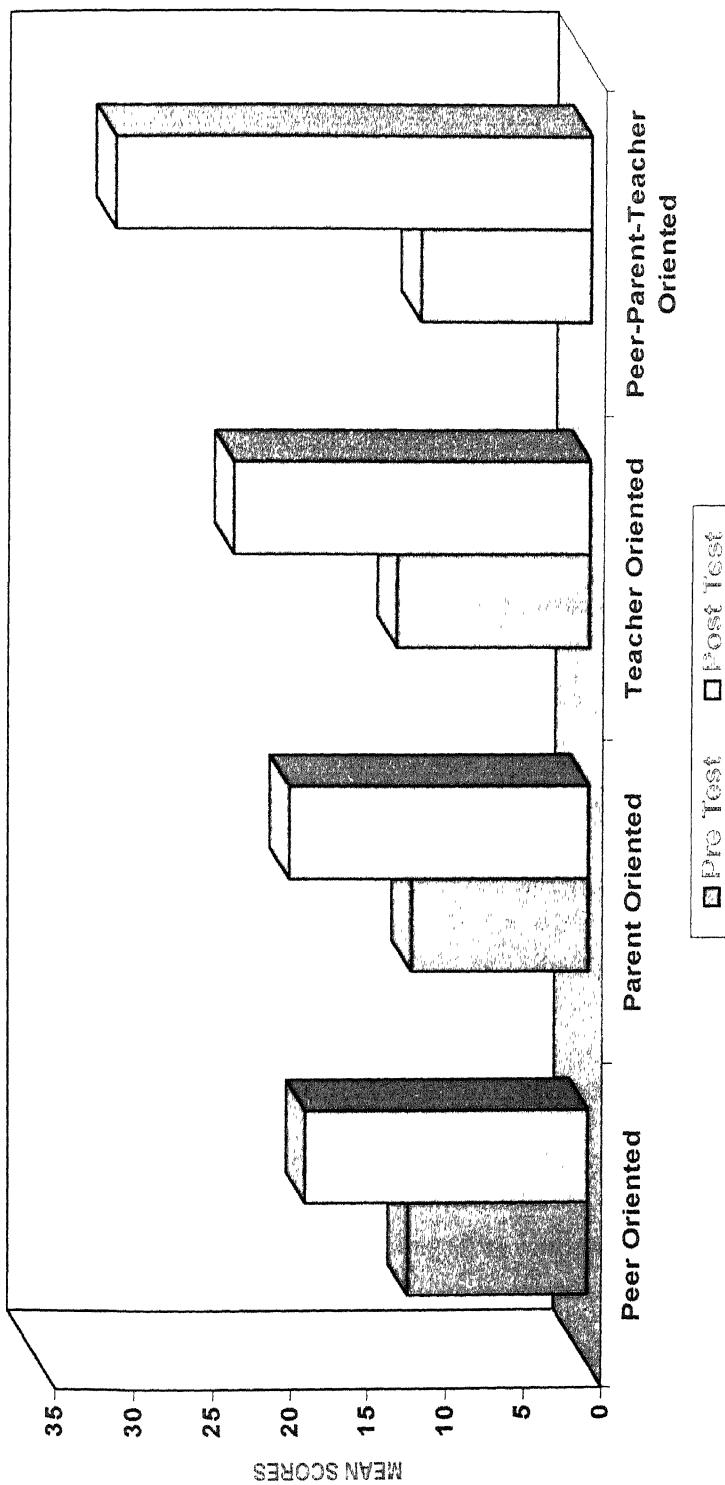
The social isolates who received peer oriented intervention strategy secured significantly higher mean scores in post test compared to pre test. In a study by **Selman, Newberger and Jacquette (1977)** they also found that peer therapy programme helped students to improve their peer relations.

In the peer oriented strategy social isolates were paired with sociometric stars. In a recent study by **Morris, Messer and Gross (1995)** the paired group experienced significant improvement in both sociometric status and positive interaction rate compared with controls and improvement was maintained at one month follow up.

No other social institution enters the child's life until after the first few formative years at home. Therefore parents become the most patent force in shaping the behaviour of the child. According to **Pervin (1980)** parents influence their childrens' behaviour in atleast three important ways,

1. Through their own behaviour they present situations that elicit certain behaviour in children
2. They serve as role models for identification, and
3. They selectively reward behaviours

Parent oriented intervention strategy was implemented on the second group of social isolates. In parent oriented intervention strategy, parents were given guidelines to correct annoying mannerisms, to improve personal appearance of children, to eliminate annoying behaviour, to improve good manners, to encourage social movement, to encourage their children to respect others, to develop sense of belonging and to develop self insight among children.



**Fig. 8. Pre Test and Post Test Scores of Social Isolate Groups on Self Perception**

It can be seen from the table that mean scores on self acceptance, self regard and self-perception in post test were higher than mean scores in pre test. The pre test and post test mean score differences were significant at 0.001 level.

Next to the parents, teachers have the greater responsibility and opportunity in shaping the behaviour of the child. Teacher oriented intervention strategy was designed and implemented to third group of social isolates.

In teacher oriented intervention strategy, exercises were given to improve concentration and memory power. Social isolates were made to sit next to sociometric stars. Assignments and work were given to them in pairs.

Teacher oriented group secured higher mean scores in post test than in pre test. Significant differences were observed between pre test and post test scores on self-acceptance, self regard and self-perception at 0.001 level.

**Coopersmith's (1959)** study indicates correlation between school achievement and positive self-concept. It has also been found that bright 'under achievers' at the school have more negative feelings about themselves than equally bright high achieving pupils.

**Bulbul (1981)** showed significant positive relationship between self concept and academic achievement.

In the present study the increase in post test score may be attributed to the teacher oriented intervention strategy. Similar results were reported by **Weissberg (1988)** that the students showed improved social relations in the classroom following an intervention programme by teachers.

Mean scores of fourth group of social isolates who received peer-parent-teacher oriented intervention strategies together were more progressed than compared to other three groups of social isolates.

The mean post test scores of the fourth group of social isolates, who received peer-parent-teacher oriented strategy were higher than the mean pre test scores on self acceptance, self regard and self-perception. The mean pre test scores were 7.20, 3.72 and 10.92; post test scores were 18.84, 11.56 and 30.40 on self acceptance, self regard and self-perception respectively. Significant differences were observed between pre test and post test mean scores on self acceptance, self regard and self-perception at 0.001 level.

To know significant improvements in self-perception scores after intervention in different social isolate groups, pre test and post test scores of these groups were compared. It can be seen from table 13 that in pre test the self-perception scores of different social isolate groups did not differ significantly from one another. However teacher oriented group obtained significantly higher mean in self-perception compared to peer-parent-teacher oriented group and the difference was significant at 0.05 level.

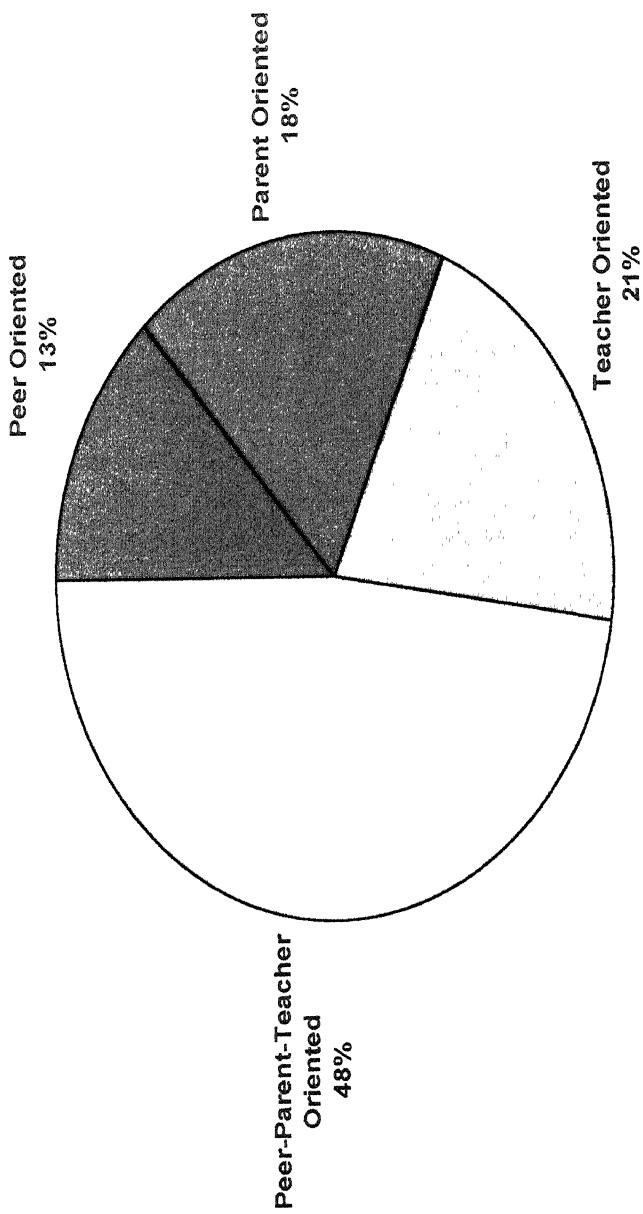
**Table 13. Pre Test Scores of Social Isolate Groups on Self Perception**

Strategy	N <sub>1</sub>	Mean	SD	N <sub>2</sub>	Mean	SD	t-values
Peer Vs Parent Oriented	50	11.54	1.50	25	11.36	1.63	0.46 <sup>o</sup>
Peer Vs Teacher Oriented	50	11.54	1.50	25	12.36	2.40	1.58 <sup>o</sup>
Peer Vs Peer-Parent-Teacher Oriented	50	11.54	1.50	25	10.92	1.78	1.51 <sup>o</sup>
Parent Vs Teacher Oriented	25	11.36	1.63	25	12.36	2.40	1.72 <sup>o</sup>
Parent Vs Peer-Parent-Teacher Oriented	25	11.36	1.63	25	10.92	1.78	0.90 <sup>o</sup>
Teacher Vs Peer-Parent-Teacher Oriented	25	12.36	2.40	25	10.92	1.78	2.41*

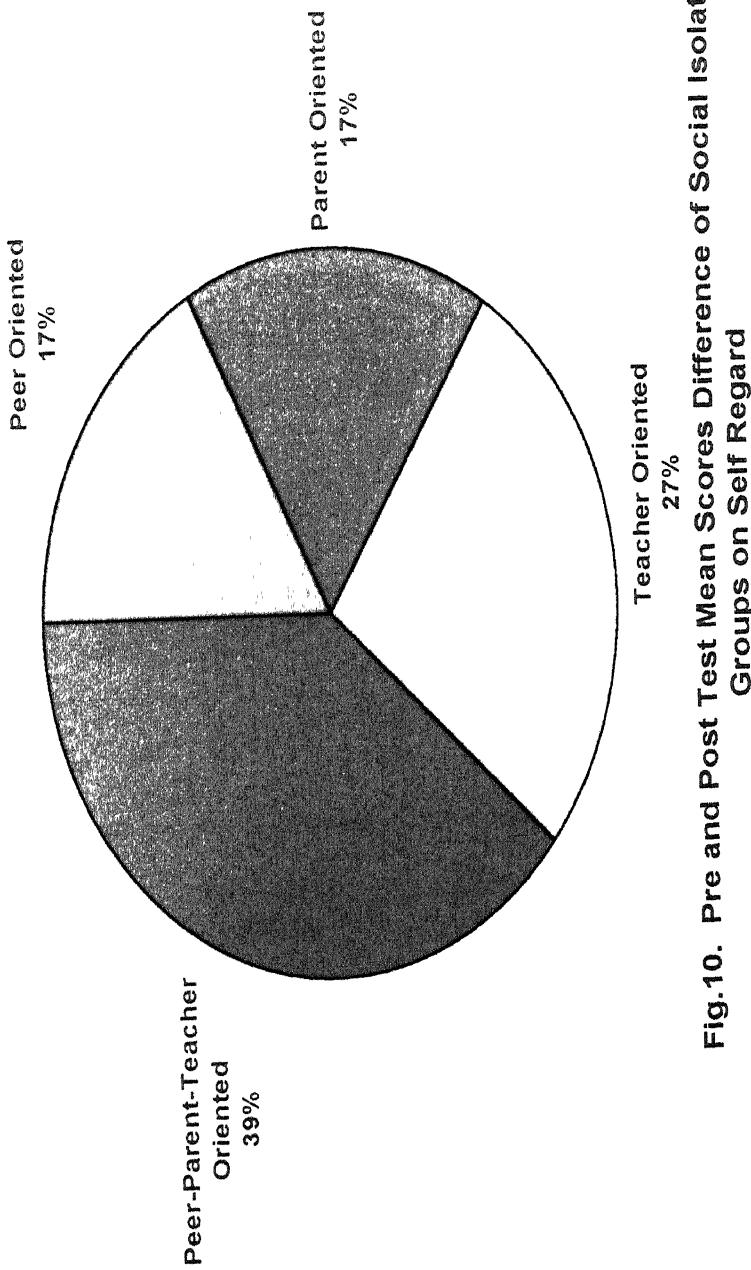
Whereas in post test (table 14) significant differences were observed among different social isolate groups. Peer-parent-teacher oriented group secured significantly higher mean score on self-perception than teacher oriented, parent oriented and peer oriented social isolate groups. The differences were significant at 0.001 level.

**Table 14. Post Test Scores of Social Isolate Groups on Self Perception**

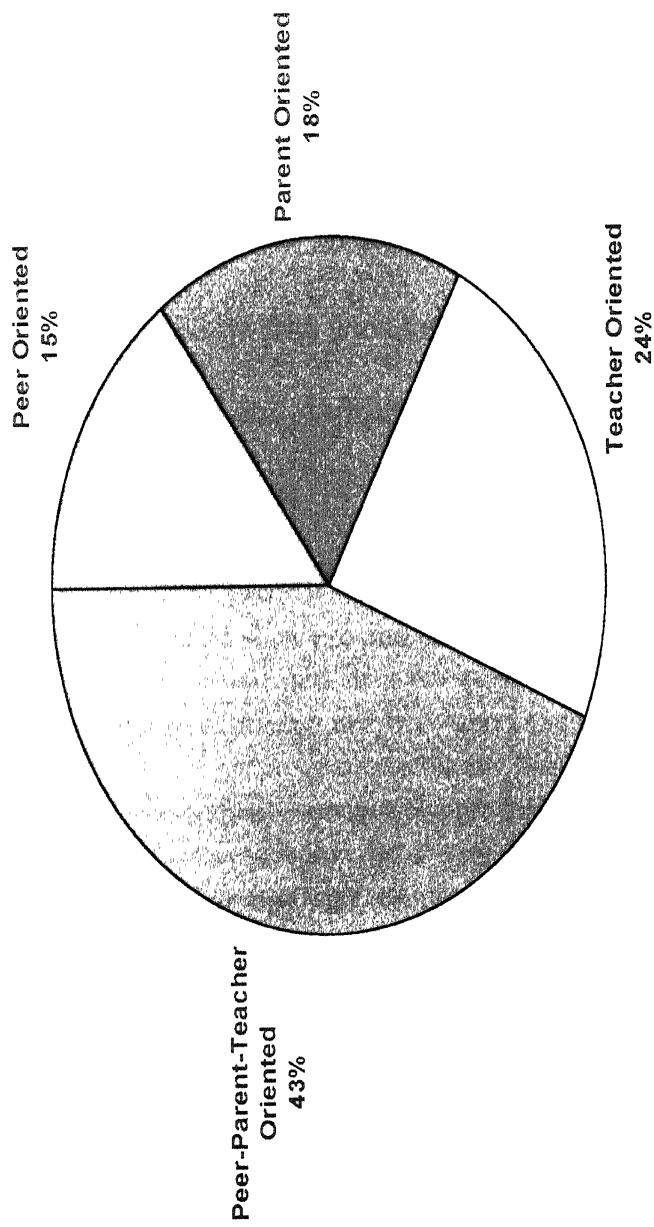
Strategy	N <sub>1</sub>	Mean	S.D.	N <sub>2</sub>	Mean	S.D.	t-values
Peer Vs Parent Oriented	50	18.16	2.62	25	19.28	3.20	1.52 <sup>o</sup>
Peer Vs Teacher Oriented	50	18.16	2.62	25	22.88	3.10	6.56***
Peer Vs Peer-Parent-Teacher Oriented	50	18.16	2.62	25	30.40	2.89	17.84***
Parent Vs Teacher Oriented	25	19.28	3.20	25	22.88	3.10	3.96***
Parent Vs Peer-Parent-Teacher Oriented	25	19.28	3.20	25	30.40	2.89	12.78***
Teacher Vs Peer-Parent-Teacher-Oriented	25	22.88	3.10	25	30.40	2.89	8.85***



**Fig. 9. Pre and Post Test Mean Scores Difference of Social Isolate Groups on Self Acceptance**



**Fig.10. Pre and Post Test Mean Scores Difference of Social Isolate Groups on Self Regard**



**Fig.11. Pre and Post Test Mean Scores Difference of Social Isolate Groups on Self Perception**

Teacher oriented group secured higher mean self-perception score than peer oriented and parent oriented and in both cases the differences were significant at 0.001 level. However no significant difference was observed between peer oriented and parent oriented social isolate groups.

It was found that, after intervention fourth group of social isolates who received peer-parent-teacher oriented intervention strategy secured significantly higher score than peer oriented, parent oriented and teacher oriented groups of social isolates on self-perception. Teacher oriented group secured greater mean scores than parent and peer oriented groups. Greater mean self-perception score was obtained by parent oriented group than peer oriented group.

Figures 9, 10 and 11 show pre and post test mean scores difference of social isolate groups on self-acceptance, self regard and self-perception. It can be seen that in the above three measures the pre and post test difference was higher for social isolate groups who received peer-parent-teacher oriented intervention strategy than the other three groups of social isolates. In other words the social isolates who received peer-parent-teacher oriented intervention strategy obtained higher scores in post test on self acceptance, self regard and self-perception than the other three groups.

**4.6 COMPARISON OF PRE TEST AND POST TEST SELF PERCEPTION SCORES OF DIFFERENT GROUPS OF SOCIAL ISOLATES WITH AVERAGE CHOSEN AND SOCIO METRIC STARS**

To find out the impact of intervention strategies the scores of four groups of social isolates on self-perception were compared with scores of average chosen and sociometric stars.

**4.6.1 Pre Test Scores of Social Isolates and Average Chosen on Self Acceptance, Self Regard and Self Perception**

It was evident from the table 15 that in pre test there were significant differences between social isolate groups and average chosen at 0.001 level on self acceptance, self regard and self-perception except on self acceptance of teacher oriented group of social isolates. Significant difference at 0.01 level was found between mean self acceptance scores of teacher oriented group of social isolates and average chosen.

It was evident from the above results that all the four groups of social isolates in pre test obtained lower mean scores on self acceptance, self regard and self-perception than average chosen.

**4.6.2 Post Test Scores of Social Isolate Groups and Average Chosen on Self Perception**

In Table 16 the mean scores and S.D values of four social isolate groups and average chosen were shown. There was significant difference between peer oriented group of social isolates and average chosen on self acceptance at 0.01 level. Significant difference between these two groups was found in pre test also. However in pre test, average chosen showed better self

acceptance than peer oriented group of social isolates. Whereas in post test i.e. after receiving peer oriented intervention strategy the self acceptance score of social isolates progressed and it was significantly higher than the mean score of average chosen.

In post test there were no significant differences between peer oriented group of social isolates and average chosen on self regard and self-perception. Whereas in pre test average chosen obtained significantly higher scores on these two aspects than social isolates. The difference observed in self regard and self-perception in these two groups was decreased in post test after implementation of peer oriented intervention. The scores of social isolates on self regard and self-perception were progressed in post test and hence no difference was observed between average chosen and social isolates.

In post test significant difference was observed between parent oriented group of social isolates and average chosen on self acceptance at 0.001 level. The second group of social isolates who received parent oriented intervention strategy secured higher mean self acceptance score than average chosen. Whereas in pre test also significant difference was observed on mean self acceptance score of parent oriented group of social isolates and average chosen and the difference was in favour of average chosen. In self regard no significant difference was observed in post test scores of parent oriented group of social isolates and average chosen. However in pre test average chosen secured significantly greater mean self regard score than social isolates. The difference between these two groups was reduced in post test scores.

In pre test average chosen secured greater mean self-perception score whereas in post test second group of social isolates who received parent oriented intervention strategy secured greater mean self-perception score. In pre test significant difference at 0.001 level between these two groups was due to greater mean score of average chosen whereas in post test significant difference at 0.05 level was due to greater mean self-perception score of parent oriented group of social isolates.

In post test third group of social isolates who received teacher oriented intervention and fourth group of social isolates who received peer-parent-teacher oriented intervention secured greater mean scores on self acceptance, self regard and self-perception than average chosen. Whereas in pre test, average chosen secured greater mean self acceptance, self regard and self perception scores. In post test there were significant differences between mean scores of teacher oriented group of social isolates and average chosen and also between peer-parent- teacher oriented group of social isolates and average chosen at 0.001 level of significance on self acceptance, self regard and self-perception.

It was evident from the table that all the four groups of social isolates showed significant improvement in self acceptance, self regard and self-perception in post test. After the intervention, in post test mean scores of all the four groups of social isolates were significantly higher than the average chosen.

**Table 15. Pre Test Scores of Social Isolate Groups and Average Chosen on Self Acceptance, Self Regard and Self Perception**

Measure	Social Isolate Groups				Average Chosen N <sub>2</sub> =125		t-values
	Group	N	Mean	S.D.	Mean	S.D.	
Self Acceptance	First (Peer Oriented)	50	7.64	1.68	10.00	3.20	4.95***
Self Regard			3.90	0.79	7.37	1.87	12.66***
Self Perception			11.54	1.50	17.13	3.07	12.28***
Self Acceptance	Second (Parent Oriented)	25	7.08	1.66	10.00	3.20	4.44***
Self Regard			4.28	0.74	7.37	1.87	8.12***
Self Perception			11.36	1.63	17.13	3.07	9.12***
Self Acceptance	Third (Teacher Oriented)	25	8.12	1.90	10.00	3.20	2.84**
Self Regard			4.20	1.29	7.37	1.87	8.09***
Self Perception			12.36	2.40	17.13	3.07	7.32***
Self Acceptance	Fourth (Peer-Parent- Teacher oriented)	25	7.20	2.14	10.00	3.20	4.19***
Self Regard			3.72	0.98	7.37	1.87	9.49***
Self Perception			10.90	1.78	17.13	3.07	9.77***

\*\* Significant at 0.01 level of significance

\*\*\* Significant at 0.001 level of significance

Table 16. Post Test Scores of Social Isolate Groups and Average Chosen on Self Acceptance, Self Regard and Self Perception

Measure	Social Isolate Groups				Average Chosen $N_2=125$		t-values
	Group	N	Mean	S.D.	Mean	S.D.	
Self Acceptance	First (Peer Oriented)	50	10.82	1.59	10.06	1.56	2.88**
Self Regard			7.34	1.49	7.87	1.69	1.95@
Self Perception			18.16	2.62	17.94	2.66	0.51@
Self Acceptance	Second (Parent Oriented)	25	11.56	2.50	10.06	1.56	3.90***
Self Regard			7.72	1.46	7.87	1.69	0.42@
Self Perception			19.28	3.20	17.94	2.66	2.23*
Self Acceptance	Third (Teacher Oriented)	25	13.20	2.35	10.06	1.56	8.35***
Self Regard			9.68	1.28	7.87	1.69	5.08***
Self Perception			22.90	3.10	17.94	2.66	8.25***
Self Acceptance	Fourth (Peer-Parent-Teacher Oriented)	25	18.84	2.41	10.06	1.56	23.16***
Self Regard			11.56	2.12	7.87	1.69	9.55***
Self Perception			30.40	2.89	17.94	2.66	21.00***

@ Not Significant

\* Significant at 0.05 level of significance

\*\* Significant at 0.01 level of significance

\*\*\* Significant at 0.001 level of significance

#### **4.6.3 Pre Test Scores of Social Isolate Groups and Sociometric Stars on Self Perception**

Table 17 shows comparison of social isolate groups and sociometric stars on self acceptance, self regard and self-perception of pre test scores. It was evident from the table that there were significant differences at 0.001 level between all social isolate groups and sociometric stars on self acceptance, self regard and self-perception. Sociometric stars secured significantly higher mean scores on self acceptance, self regard and self-perception than social isolate groups.

Sociometric stars are self confident and secure, feels free to be original and creative. Sociometric star feels that he is being supported in his originality by the approval of the group, knowing that he is well liked also give him confidence to attempt to influence others and to make suggestions for activities that will lead to group enjoyment. The person who feels secure is mentally free to turn outward and become interest in people and things instead of being self-bound. Social isolates on the otherhand characterized by lack of self-confidence and self respect (**Hurlock, 1986**).

Some of the qualities of sociometric stars were admirability, respectability, maturity and responsibility (**Raven and Rubin, 1983**). Sociometric stars who feel welcomed and respected in a group are more likely to respond in a congenial and friendly spirit than social isolates who sense disregard, hostility or criticism (**Hurlock, 1986; Prabhakara Rao, 1969**).

Table 17. Pre Test Scores of Social Isolate Groups and Sociometric Stars on Self Acceptance, Self Regard and Self Perception

Measure	Social Isolate Groups				Sociometric Stars N <sub>2</sub> =125		t-values
	Group	N	Mean	S.D.	Mean	S.D.	
Self Acceptance	First (Peer Oriented)	50	7.64	1.68	16.26	2.24	24.61***
Self Regard			3.90	0.79	11.38	1.41	35.28***
Self Perception			11.54	1.50	27.59	2.48	42.76***
Self Acceptance	Second (Parent Oriented)	25	7.08	1.66	16.26	2.24	19.46***
Self Regard			4.28	0.74	11.38	1.41	24.44***
Self Perception			11.36	1.63	27.59	2.48	31.40***
Self Acceptance	Third (Teacher Oriented)	25	8.12	1.90	16.26	2.24	17.00***
Self Regard			4.20	1.29	11.38	1.41	23.50***
Self Perception			12.36	2.40	27.59	2.48	28.19***
Self Acceptance	Fourth (Peer-Parent-Teacher Oriented)	25	7.20	2.14	16.26	2.24	18.60***
Self Regard			3.70	0.98	11.38	1.40	25.87***
Self Perception			10.90	1.78	27.59	2.48	32.02***

\*\*\* Significant at 0.001 level of significance

Because of the presence of all the positive characteristics sociometric stars secured greater mean self-perception scores than social isolates. **Dodge, Coie and Brakke, 1982** found that social isolate children make fewer social contacts, feel difficulty in integrating with peers, which might be the cause of low self-perception.

#### **4.6.4 Post Test Scores of Social Isolate Groups and Sociometric Stars on Self Perception**

Table 18 shows post test scores of four groups of social isolates and sociometric stars. In post test also like pre test sociometric stars obtained significantly higher mean scores on self acceptance, self regard and self-perception than social isolates. Compared to pre test scores, in post test the mean scores of all the four groups of social isolates on self acceptance, self regard and self-perception were progressed significantly. However inspite of this progress significant differences were observed on self acceptance, self regard and self-perception between social isolates and sociometric stars. Only in self regard no significant difference was observed between peer-parent-teacher oriented group of social isolates and sociometric stars.

In pre test all the four groups of social isolates secured lower mean scores on self acceptance, self regard and self-perception than average chosen and sociometric stars. However after receiving intervention programmes all the four groups of social isolates obtained higher mean scores on self acceptance, self regard and self- perception in post test. In post test the mean

**Table 18. Post Test Scores of Social Isolate Groups and Sociometric Stars on Self Acceptance, Self Regard and Self Perception**

Measure	Social Isolate Groups				Sociometric Stars N <sub>2</sub> =125		t-values
	Group	N	Mean	S.D.	Mean	S.D.	
Self Acceptance	First (Peer Oriented)	50	10.82	1.59	16.29	1.82	18.58***
Self Regard			7.34	1.49	11.42	1.34	17.63***
Self Perception			18.16	2.62	27.70	2.25	24.20***
Self Acceptance	Second (Parent Oriented)	25	11.56	2.50	16.29	1.80	11.08***
Self Regard			7.70	1.46	11.40	1.34	12.40***
Self Perception			19.28	3.20	27.70	2.25	15.87***
Self Acceptance	Third (Teacher Oriented)	25	13.20	2.35	16.28	1.80	7.35***
Self Regard			9.68	1.28	11.42	1.34	5.98***
Self Perception			22.88	3.10	27.70	2.25	9.17***
Self Acceptance	Fourth (Peer-Parent-Teacher Oriented)	25	18.80	2.41	16.29	1.80	6.04***
Self Regard			11.56	2.12	11.42	1.34	0.42@
Self Perception			30.40	2.89	27.70	2.25	5.20***

@ Not Significant

\*\*\* Significant at 0.001 level of significance

self acceptance, self regard and self-perception scores of social isolates were higher than mean scores of average chosen. Whereas the mean post test scores of all four groups of social isolates on self acceptance, self regard and self-perception were significantly lower than sociometric stars.

#### **4.7 DESCRIPTION OF ADJUSTMENT SCORES**

The Bell Adjustment Inventory provides six measures of personal and social adjustments i.e. home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness, masculinity - femininity. The measurement of six areas of adjustment permits location of specific adjustment difficulties.

##### **4.7.1 Description of Pre Test Scores of Sociometric Stars on Adjustment**

The mean pre test score of sociometric stars on adjustment was 138.82. The values of other measures of central tendency viz., median and mode were 136.00 and 130.37 respectively. The descending order of the values of mean, median and mode reveals that there exists a positive skewness in the distribution of scores. The measures of central tendency show that the frequency distribution was symmetrical as the empirical relationship i.e., Mean - Mode = 3 (Mean - Median) was within the acceptable approximation.

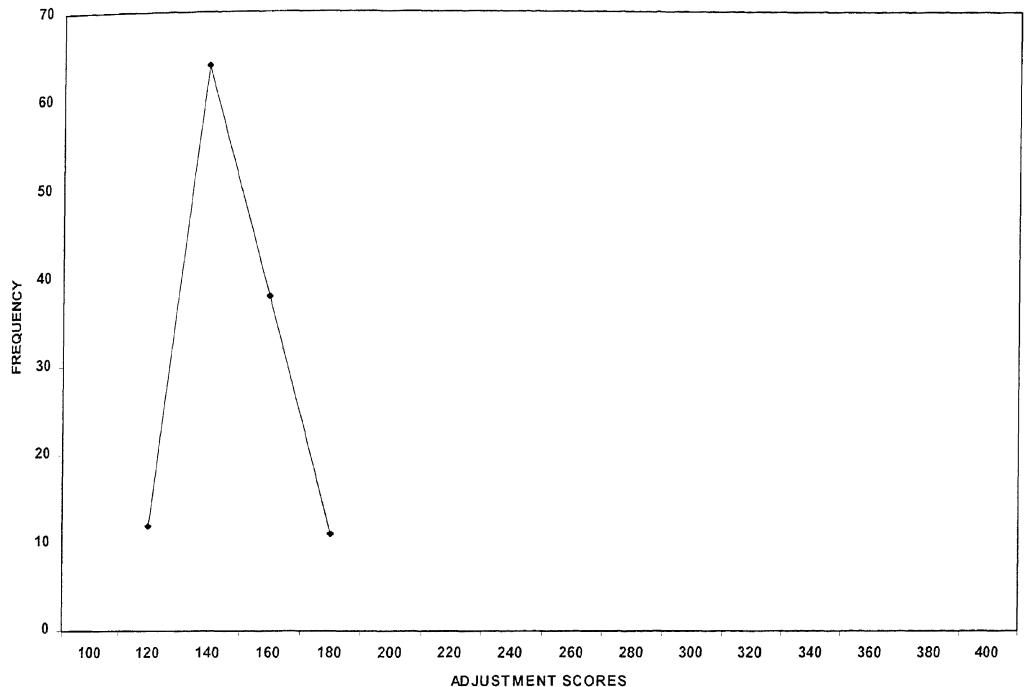
The measures of dispersion, namely range (58.00), quartile deviation (9.00) and standard deviation (13.81) disclose that the distribution of scores were almost normal as the empirical relationship between Q.D. and S.D. (Q.D. = 2/3 S.D.) was within the acceptable approximation. The kurtosis of the distribution was 2.28 which reveals that the distribution of scores was platykurtic. Graphical representation of the pre test scores of sociometric stars on adjustment was presented in Figure 12.

#### **4.7.2 Description of Post Test Scores of Sociometric Stars on Adjustment**

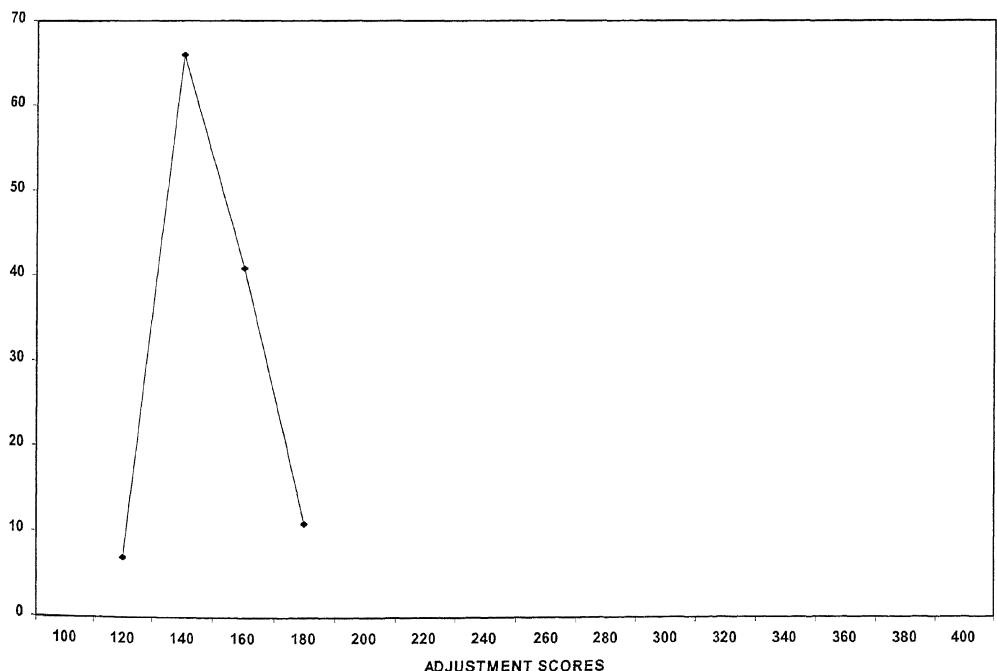
The mean post test score of sociometric stars on adjustment was 139.02. The values of other measures of central tendency viz., median and mode were 138.00 and 135.97 respectively. The descending order of the values of mean, median and mode reveals that there exists a positive skewness in the distribution of scores. The measures of central tendency show that the frequency distribution was symmetrical as the empirical relationship i.e., Mean - Mode = 3 (Mean - Median) was within the acceptable approximation.

The measures of dispersion, namely range (62.00), quartile deviation (10.00) and standard deviation (14.18) disclose that the distribution of scores were almost normal as the empirical relationship between Q.D. and S.D. (Q.D. = 2/3 S.D.) was within the acceptable approximation. The kurtosis of the distribution was 2.67 which reveals that the distribution of scores was platykurtic. Graphical representation of the post test scores of sociometric stars on adjustment was presented in Figure 12.

### **PRE TEST**



### **POST TEST**



**Fig. 12. Pre Test and Post Test Scores of Sociometric Stars on Adjustment**

From the Figure 12 it was evident that most of the sociometric stars were in the class interval of adjustment scores of 120 to 140. It was also evident that all the sociometric stars were in the class interval of 100 to 180 both in pre test and post test. No change was observed in post test from pre test scores of sociometric stars on adjustment because sociometric stars were kept as controls.

#### **4.7.3 Description of Pre Test Scores of Average Chosen on Adjustment**

The mean pre test score of average chosen on adjustment was 231.68. The values of other measures of central tendency viz., median and mode were 238.00 and 250.64 respectively. The ascending order of the values of mean, median and mode reveals that there exist a negative skewness in the distribution of scores.

"In a negatively skewed curve or distribution the arithmetic mean is smaller than the median and mode; and the median is smaller than the mode". In a negatively skewed curve the relationship (of the central tendencies) is generally expressed as : Mean < Median < Mode. The measures of central tendency show that the frequency distribution was symmetrical as the empirical relationship  $\text{Mean} - \text{Mode} = 3(\text{Mean} - \text{Median})$  was within the acceptable approximation.

The measures of dispersion, namely range (74.00), quartile deviation (2.00) and standard deviation (3.06) disclose that the distribution of scores was almost normal as the empirical relationship between Q.D. and S.D. ( $Q.D. = 2/3 S.D.$ ) was within the acceptable approximation. The kurtosis of the distribution was 1.89 which reveals that the distribution of scores was platykurtic. Graphical representation of the pre test scores of average chosen on adjustment was presented in Figure 13.

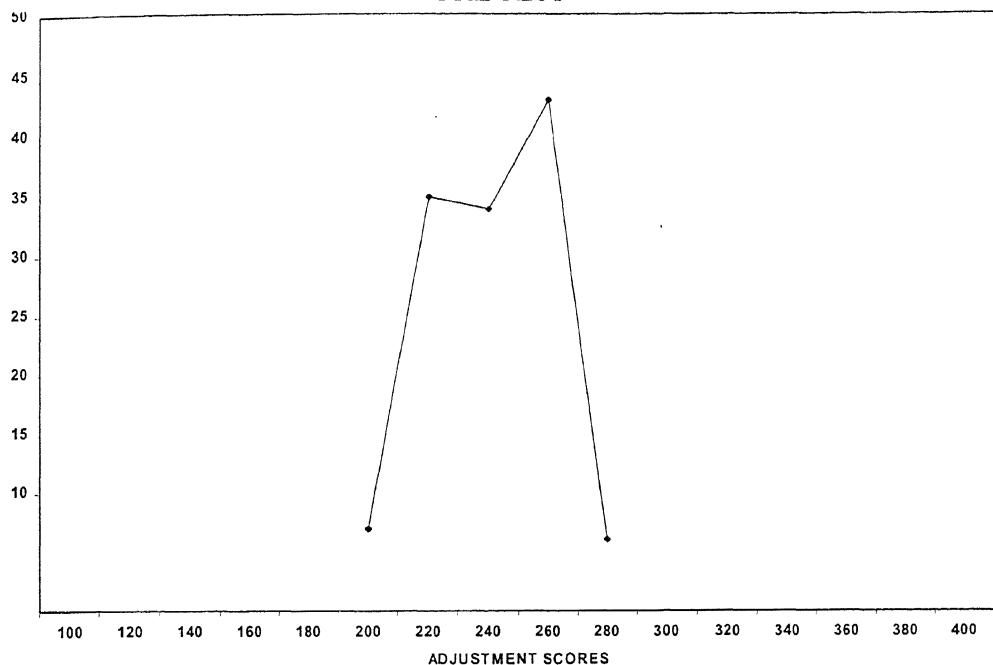
#### **4.7.4 Description of Post Test Scores of Average Chosen on Adjustment**

The mean post test score of average chosen on adjustment was 228.14. The values of other measures of central tendency viz., median and mode were 233.00 and 242.73 respectively. The ascending order of the values of mean, median and mode reveals that there exists a negative skewness in the distribution of scores.

The measures of central tendency show that the frequency distribution was symmetrical as the empirical relationship  $Mean - Mode = 3$  ( $Mean - Median$ ) was within the acceptable approximation.

The measures of dispersion, namely range (254.00), quartile deviation (17.00) and standard deviation (26.04) disclose that the distribution of scores was almost normal as the empirical relationship between Q.D. and S.D. ( $Q.D. = 2/3 S.D.$ ) was within the acceptable approximation. The kurtosis of the distribution was 29.69 which reveals that the distribution of scores was leptokurtic. Graphical representation of the post test scores of average chosen on adjustment was presented in Figure 13.

### PRE TEST



### POST TEST

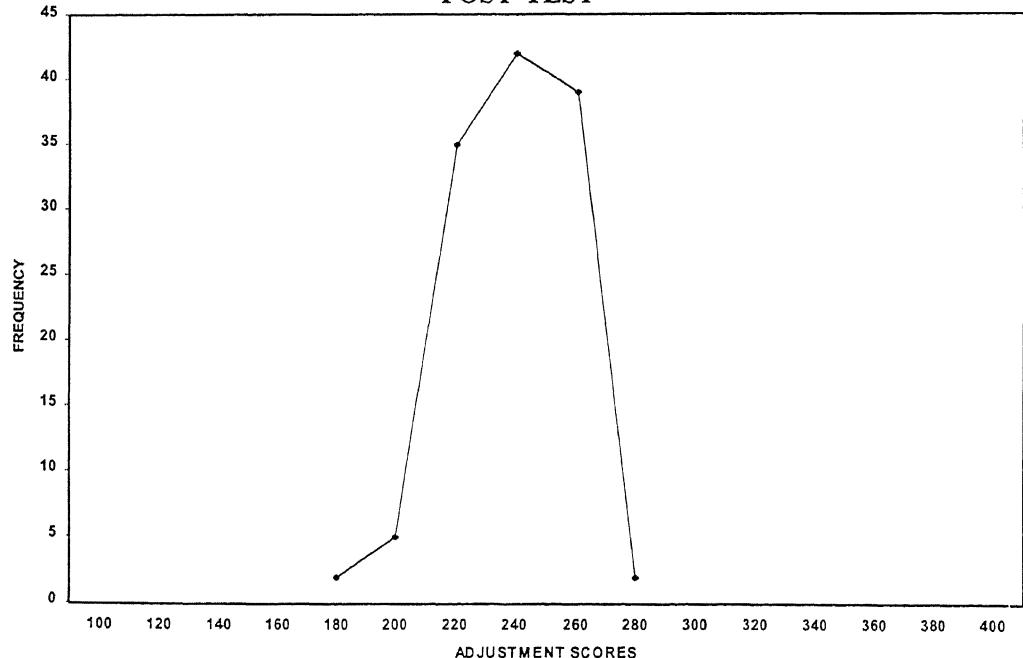


Fig. 13. Pre Test and Post Test Scores of Average Chosen on Adjustment

#### **4.7.5 Description of Pre Test Scores of Social Isolates on Adjustment**

The mean pre test score of social isolates on adjustment was 316.32. The values of other measures of central tendency viz., median and mode were 324.00 and 339.36 respectively. The ascending order of the values of mean, median and mode reveals that there exists a negative skewness in the distribution of scores.

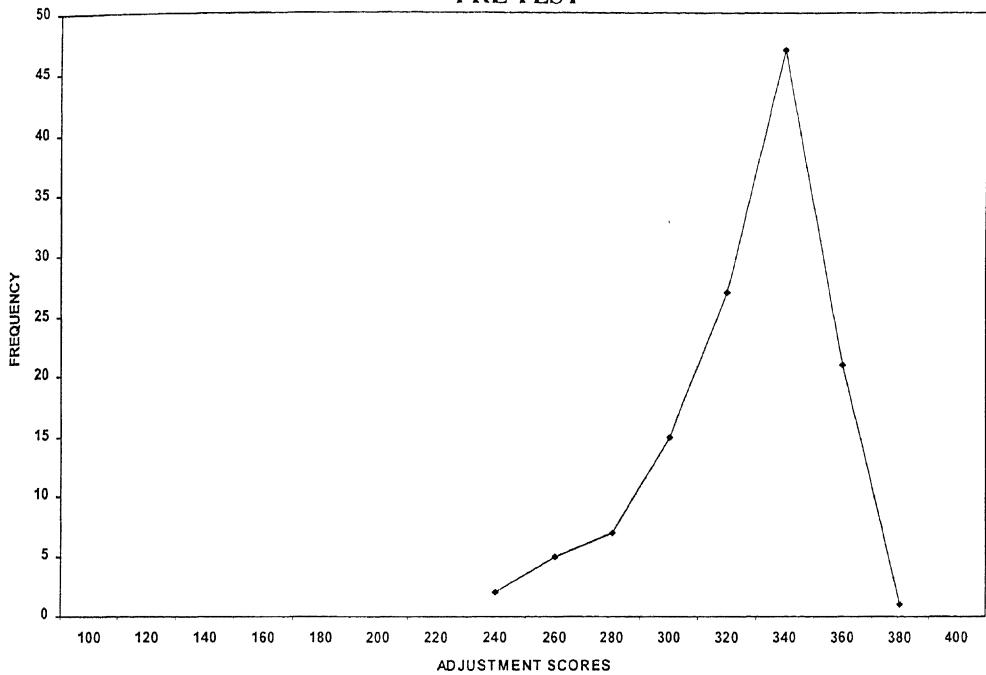
The measures of central tendency show that the frequency distribution was symmetrical as the empirical relationship i.e.  $\text{Mean} - \text{Mode} = 3 (\text{Mean} - \text{Median})$  was within the acceptable approximation.

The measures of dispersion, namely range, quartile deviation and standard deviation were 11.00, 1.50 and 1.83 respectively. The value of quartile deviation (1.50) was greater than the value of  $2/3 \text{ S.D.}$  (1.22). The kurtosis of the distribution was 3.58 which reveals that the distribution of scores was mesokurtic. Graphical representation of the pre test scores of social isolates on adjustment was presented in Figure 14.

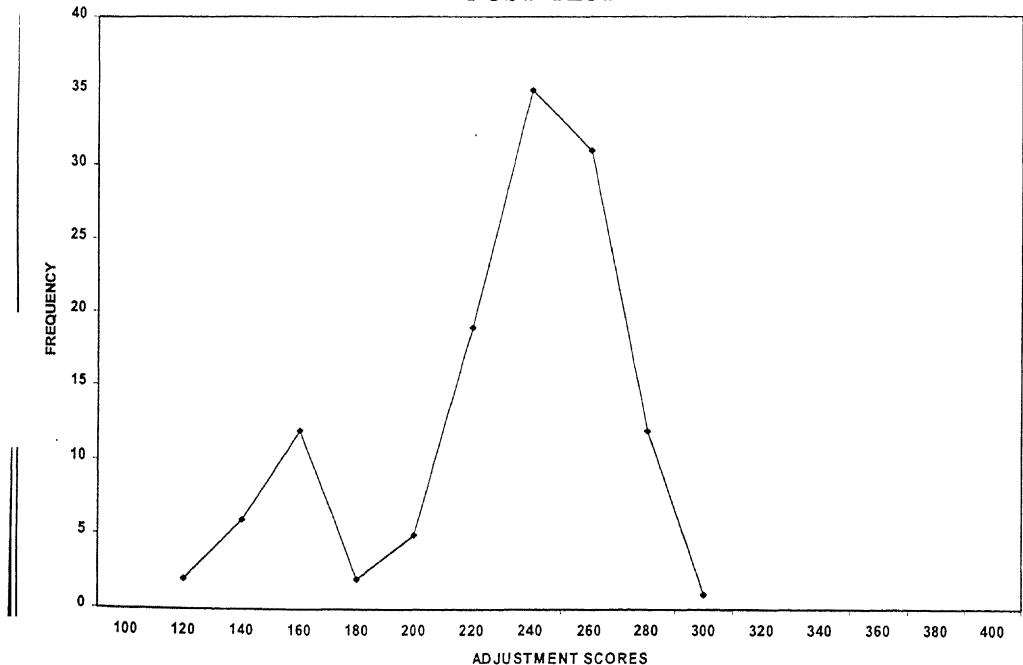
#### **4.7.6 Description of Post Test Scores of Social Isolates on Adjustment**

The mean post test score of social isolates on adjustment was 220.38. The values of other measures of central tendency viz., median and mode were 232.00 and 255.23 respectively. The ascending order of the values of mean, median and mode reveals that there exists a negative skewness in the distribution of scores.

### PRE TEST



### POST TEST



**Fig. 14. Pre Test and Post Test Scores of Social Isolates on Adjustment**

The measures of central tendency show that the frequency distribution was symmetrical as the empirical relationship i.e. Mean - Mode = 3 (Mean - Median) was within the acceptable approximation.

The values of measures of dispersion viz., range, quartile deviation and standard deviation were 168.00, 21.00 and 40.08 respectively. The value of quartile deviation was less than  $2/3$  S.D. ( $21.00 < 26.72$ ). The value of kurtosis (3.07) reveals that the distribution of scores was mesokurtic.

From the Figure 14 it was evident that the adjustment scores of social isolates in pre test were in the range of 240-380. Whereas in post test the range was 120-300. In post test the adjustment of social isolates was improved due to implementation of intervention strategies. Low score indicates better adjustment. In post test the adjustment score of social isolates was reduced and this indicates that their adjustment was advanced.

#### **4.8 ADJUSTMENT LEVELS OF SOCIOMETRIC STARS, AVERAGE CHOSEN AND SOCIAL ISOLATES**

To get a better understanding of the subject's position in each of the component, subjects were divided into Excellent, Good, Average, Poor and Unsatisfactory categories on the basis of their scores. Mean plus or minus 1 SD was taken as a cut off point. The mean plus 2 SD gives the unsatisfactory score, mean plus 1 SD gives the poor score, mean gives average score, mean minus 1 SD gives good score, mean minus 2 SD gives excellent score.

#### **4.8.1 Home Adjustment Levels of Sociometric Stars, Average Chosen and Social Isolates**

Relationships with family members are greatly influenced by the home setting - the pattern of life in the home and social status of the family. Table 19 shows the classification of subjects as per their score on home adjustment into excellent, good, average, poor and unsatisfactory categories.

**Table 19. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Pre Test Scores on Home Adjustment**

Level of Home Adjustment	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Excellent	97	77.6	2	1.6	0	0
Good	28	22.4	86	68.8	3	2.4
Average	0	0	37	29.6	28	22.4
Poor	0	0	0	0	94	75.2
Unsatisfactory	0	0	0	0	0	0

From the table, it was evident that in pre test the home adjustment scores of all the sociometric stars were under the categories of excellent (77.6%) and good (22.4%). None of the sociometric stars had average, poor and unsatisfactory levels of home adjustment.

Majority of the average chosen (68.8%) had good and 29.6 per cent had average levels of home adjustment. None of the average chosen had poor and unsatisfactory levels of home adjustment.

In pre test 75.2 per cent of the social isolates had poor and 22.4 per cent had average levels of home adjustment. None of the social isolates were included either in excellent or in unsatisfactory categories.

The results of the present investigation shows that home relationships of social isolates were unsatisfactory. Similar results were reported by **Sharma (1970)** that sociometric stars had a better home adjustment than the social isolates.

Table 20 shows distribution of sociometric stars, average chosen and social isolates as per their home adjustment scores in post test.

**Table 20. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Post Test Scores on Home Adjustment**

Level of Home Adjustment	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Excellent	84	67.2	4	3.2	10	8.0
Good	41	32.8	78	62.4	73	58.4
Average	0	0	42	33.6	42	33.6
Poor	0	0	1	0.8	0	0
Unsatisfactory	0	0	0	0	0	0

It can be seen from the table 20 that there were not much changes among sociometric stars and average chosen on levels of home adjustment in post test. However after receiving the intervention programme there was a positive change in the home adjustment levels of social isolates. In pre test

none of the social isolates had excellent level. Whereas in post test after intervention 8 per cent of social isolates had excellent level and 58.4 per cent fell under the category of good in home adjustment. In pre test only 2.4 per cent of social isolates had good level of home adjustment.

#### **4.8.2 Health Adjustment Levels of Sociometric Stars, Average Chosen and Social Isolates**

Table 21 shows distribution of sociometric stars, average chosen and social isolates as per their pre test scores on health adjustment.

**Table 21. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Pre Test Scores on Health Adjustment**

Level of Health Adjustment	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Excellent	79	63.2	0	0	0	0
Good	46	36.8	70	56.0	3	2.4
Average	0	0	55	44.0	25	20.0
Poor	0	0	0	0	97	77.6
Unsatisfactory	0	0	0	0	0	0

It can be seen from the table 21 that 63.2 per cent of the sociometric stars had excellent and 36.8 per cent had good levels of health adjustment. None of the sociometric stars fell under unsatisfactory, poor or average levels of adjustment. As per the manual, this means that sociometric stars had reported that they had not had a history of physical illness and that the physical ailments, they may have had, not bothered them sufficiently to cause discomfort or the way had developed an accepting attitude towards them.

Fifty six per cent of average chosen had good level of health adjustment and the remaining 44 per cent had average level of health adjustment. None of them had either excellent or poor and unsatisfactory levels of health adjustment. Whereas only 2.4 per cent of social isolates had good level and 20 per cent had average level of health adjustment. Majority of them (77.6%) had poor level of health adjustment.

**Bell (1962)** suggested that there may be a tendency for students with health problems covered in the inventory to experience tensions in their social and emotional relationships. Preoccupation with one's bodily aches and pains is sometimes a symptom of failure to make wholesome social contacts and to learn how to express one's feelings.

From this table, it was evident that sociometric stars had good level, average chosen had average level and social isolates had poor levels of health adjustment.

Table 22 shows distribution of sociometric stars, average chosen and social isolates as per their post test scores in health adjustment.

**Table 22. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Post Test Scores on Health Adjustment**

Level of Health Adjustment	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Excellent	87	69.6	7	5.6	15	12.0
Good	36	28.8	70	56.0	60	48.0
Average	2	1.6	47	37.6	49	39.2
Poor	0	0	1	0.8	1	0.8
Unsatisfactory	0	0	0	0	0	0

It was evident from the table 22 that the same trend was observed in the post test scores of health adjustment as found in the post test scores of home adjustment. There was not much change in the positions of sociometric stars and average chosen in the levels of health adjustment. However positive changes were observed in the health adjustment levels of social isolates. In pre test none of the social isolates had excellent level of health adjustment. Whereas in post test, after implementation of intervention strategies 12 per cent had excellent level, 48 per cent had good health adjustment and nearly 39 per cent had average level of health adjustment. In post test none of the social isolates fell in the category of unsatisfactory health adjustment.

#### **4.8.3 Adjustment Levels of Sociometric Stars, Average Chosen and Social Isolates on Submissiveness - Self Assertion**

Table 23 shows the distribution of sociometric stars, average chosen and social isolates as per their pre test scores on submissiveness - self assertion.

**Table 23. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Pre Test Scores on Submissiveness - Self Assertion**

Level of Submissiveness Self Assertion	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very Assertive	85	68.0	5	4.0	0	0
Assertive	40	32.0	57	45.6	4	3.2
Average	0	0	63	50.4	27	21.6
Submissive	0	0	0	0	93	74.4
Very Submissive	0	0	0	0	1	0.8

The kind of personal and social adjustments children make is greatly influenced by the extent to which their peers find them acceptable (**Margolin, 1969**).

Individuals with low scores tend to be self-confident and assertive. In pre test almost all the sociometric stars were in the category of very assertive (68%) and assertive (32%). None of them had average, submissive and very submissive levels. This means sociometric stars were usually very self confident and were disturbed little by what others think about them. They can stand before groups and speak without stage fright.

In case of average chosen only 4 per cent had very assertive level and majority of them had assertive (45.6%) and average (50.4%) levels. None of them had submissive and very submissiveness levels on this scale. Whereas none of the social isolates had very assertive level on submissiveness-self assertion measure.

Subjects who make high scores on submissiveness do not usually participate in student activities in classes, while students who make low scores do. Individuals scoring high tend to be submissive and retiring in their social contacts.

In pre test most of the social isolates (74%) were submissive. According to **Deutsch (1974)** children who are isolated not only antagonize their peers by their behaviour but they also try to spoil their fun. Unfavourable self-concepts lead to poor adjustments and unsatisfactory social relationships. As a result social isolate children lacks self-confidence and self respect.

This means that social isolates lack confidence in several of these situations or roles : (1) meeting people in groups or introducing one person to another, (2) conversing easily with different types of people, (3) taking the initiative in social situations, (4) speaking before groups, (5) accepting leadership roles, (6) reciting orally in class; (7) entering groups by oneself, (8) having the social spot light turned on them, (9) making friends easily, (10) avoiding feelings of self-consciousness and shyness.

Table 24 shows distribution of sociometric stars, average chosen and social isolates as per their post test scores on submissiveness-self assertion.

**Table 24. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Post Test Scores on Submissiveness-Self Assertion**

Level of Submissiveness Self Assertion	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very Assertive	81	65.0	6	4.8	12	9.6
Assertive	44	35.0	52	41.6	52	41.6
Average	0	0	66	52.8	61	48.8
Submissive	0	0	1	0.8	0	0
Very Submissive	0	0	0	0	0	0

There were not much changes in the levels of sociometric stars and average chosen in the post test.

In pre test most of the social isolates (nearly 74%) were submissive. This means that most of the social isolates were unable to participate in group activities. Their inability to participate in group activities results social isolation.

According to Bell (1962) much of a subject's excessive self-consciousness may be overcome if he gets into an action programme that strengthens his social skills. As he develops understanding his skills in dealing with group situations, these experiences become signs to him that he is improving.

In the present study, after receiving intervention programmes there were positive changes in the levels of social isolates on this measure. In pre test none of the social isolates had very assertive level. Whereas in post test 9.6 per cent had very assertive level and 41.6 per cent had assertive level. The remaining 49 per cent had average levels of self assertion.

#### **4.8.4 Adjustment Levels of Sociometric Stars, Average Chosen and Social Isolates on Emotionality**

Table 25 shows distribution of sociometric stars, average chosen and social isolates as per their pre test scores on emotionality.

**Table 25. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Pre Test Scores on Emotionality**

Level of Emotionality	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Excellent	89	71.2	5	4.0	0	0
Good	36	28.8	53	42.4	2	1.6
Average	0	0	66	52.8	34	27.2
Poor	0	0	1	0.8	89	71.2
Unsatisfactory	0	0	0	0	0	0

Almost all the sociometric stars were in the category of excellent (71.2%) and good (28.8%) levels in emotionality. None of them had average, poor and unsatisfactory levels. This means that sociometric stars were emotionally secure.

In case of average chosen only 4 per cent had excellent levels and majority of them had good (42.4%) and average (52.8%) levels. Only 0.8 per cent of the average chosen had poor level of emotionality. None of them had unsatisfactory level on emotionality.

A study conducted by **Cohen, Reinherz and Frost (1994)** showed that social isolates were found to reflect emotional and behavioural distress.

In the present study also majority (71.2%) of the social isolates had poor level of emotionality. As per the manual high scores on emotionality suggest that the subject has concerns in one or more of the following areas:

- (1) a tendency to live in a world of daydreams and to imagine things,
- (2) volatile feelings such as fear, anger, and excitement, (3) depressive feelings coming from isolation and from feelings of inferiority (4) the feeling that one is the victim of fate and misfortune, (5) feelings of guilt, (6) feelings of self-consciousness, and easily hurt feelings, (7) worry, anxiety and nervousness.

Table 26 shows distribution of sociometric stars, average chosen and social isolates as per their post test scores on emotionality.

**Table 26. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Post Test Scores on Emotionality**

Level of Emotionality	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Excellent	85	68.0	9	7.2	8	6.4
Good	40	32.0	58	46.4	56	44.8
Average	0	0	58	46.4	61	48.8
Poor	0	0	0	0	0	0
Unsatisfactory	0	0	0	0	0	0

It was evident from the table 26 that when the post test and pre test levels of sociometric stars and average chosen were compared there was not much change in their levels of emotionality.

In pre test 71.2 per cent of the social isolates had poor level of emotionality whereas in post test none of them had poor level of emotionality. In post test after receiving intervention programmes majority of social isolates had good (44.8%) and average (48.8%) levels of emotionality.

#### **4.8.5 Adjustment Levels of Sociometric Stars, Average Chosen and Social Isolates on Hostility - Friendliness**

Table 27 shows distribution of sociometric stars, average chosen and social isolates as per their pre test scores on hostility - friendliness.

**Table 27. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Pre Test Scores on Hostility-Friendliness**

Level of Hostility-Friendliness	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very Friendly	87	69.6	1	0.8	3	2.4
Friendly	38	30.4	21	16.8	10	8.0
Average	0	0	95	76.0	62	49.6
Somewhat critical	0	0	8	6.4	47	37.6
Hostile	0	0	0	0	3	2.4

Majority of the sociometric stars obtained very friendly (69.6%) and friendly (30.4%) levels in this measure. Majority of the average chosen (76%) had average level on hostility-friendliness measure in pre test.

Among social isolates 49.6 per cent had average level and 37.6 per cent had somewhat critical level and 2.4 per cent had hostile levels on hostility-friendliness. So it was evident that sociometric stars were friendly and accept people whereas social isolates were critical in social relationships.

The results were inline with Leelavathi's (1996) study. Her findings indicated that there was a significant difference between sociometric stars and social isolates on their friendship status. Sociometric stars showed higher friendship status than social isolates.

Table 28 shows distribution of sociometric stars, average chosen and social isolates as per their post test scores on hostility-friendliness.

**Table 28. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Post Test Scores on Hostility-Friendliness**

Level of Hostility-Friendliness	Sociometric Stars		Average Chosen		Social Isolates	
	Number	Percentage	Number	Percentage	Number	Percentage
Very Friendly	85	68.0	2	1.6	12	9.6
Friendly	40	32.0	24	19.2	29	23.2
Average	0	0	90	72.0	75	60.0
Somewhat critical	0	0	9	7.2	9	7.2
Hostile	0	0	0	0	0	0

It was evident from the table 28 that there were not much changes in post test scores of sociometric stars and average chosen on hostility-friendliness measure.

In pre test only 2.4 per cent of the social isolates had very friendly and only 8 per cent had friendly levels on hostility-friendliness measure. Whereas in post test after intervention 9.6 per cent of social isolates had very friendly, 23.2 per cent had friendly level and sixty per cent had average level on this measure. In post test only 7.2 per cent of social isolates had somewhat critical on hostility-friendliness. In post test after intervention none of the social isolates had secured hostile score.

#### **4.8.6 Adjustment Levels of Sociometric Stars, Average Chosen and Social Isolates on Masculinity-Femininity**

Questions included in masculinity-femininity section of the inventory are items on which there is a marked difference between answers of men and women. High score on this measure indicate greater preference for masculine activity and low score indicate preference for typically feminine activity. So the scores of boys and girls were shown separately for this measure.

Table 29 shows distribution of sociometric stars, average chosen and social isolates as per their pre test scores on masculinity-femininity.

**Table 29. Distribution of Sociometric Stars, Average Chosen and Social Isolates as per their Pre Test Scores on Masculinity-Femininity**

Level of Masculinity Femininity	Sociometric Stars				Average Chosen				Social Isolates			
	Boys	Per cent	Girls	Per cent	Boys	Per cent	Girls	Per cent	Boys	Per cent	Girls	Per cent
Strongly Masculine	29	49.2	31	47.0	0	0	0	0	0	0	0	0
Masculine	30	50.8	29	44.0	10	16.13	6	9.5	2	3.33	1	1.54
Average	0	0	6	9.0	39	62.9	41	65.0	16	26.67	14	21.54
Feminine	0	0	0	0	13	20.97	7	11.0	34	56.67	12	18.46
Strongly feminine	0	0	0	0	0	0	9	14.5	8	13.33	38	58.46

Among sociometric stars majority of the boys (49.2%) and girls (47%) were in strongly masculine level and 50.8 per cent of boys and 44 per cent of girls were in masculine level. Only 9 per cent of the girls among sociometric stars were in average level in masculinity-femininity measure.

Among average chosen none of the boys and girls had strongly masculine level. Sixteen per cent of boys and 9.5 per cent of girls were in masculine level. Majority of the boys (62.9%) and girls (65%) among average chosen were in average level in this measure. Whereas 20.97 per cent of boys and 11 per cent of girls were in feminine level and 14.5 per cent of girls were in strongly feminine level.

Only 5 per cent of boys and 27.7 per cent of girls among social isolates were in feminine level in post test. In contrast to 71.79 per cent of social isolates who were in strongly feminine level in pre test none of them were in this level in post test.

#### **4.9 COMPARISON OF ADJUSTMENT SCORES OF SOCIO METRIC STARS, AVERAGE CHOSEN AND SOCIAL ISOLATES**

Bell Adjustment Inventory was administered to sociometric stars, average chosen and social isolates both before and after implementation of intervention strategies. In this section, pre test and post test scores of sociometric stars, average chosen and social isolates were presented.

##### **4.9.1 Pre Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Adjustment**

The mean pre test scores of sociometric stars, average chosen and social isolates on different measures of adjustment were presented in table 31.

Many earlier studies have shown that family environmental factors affect childrens' status among peers. **Dishion (1990)** study disclosed that isolated children experienced poorer family monitoring and discipline practices, more family stress and lower economic status.

**Patterson *et al.* (1990)** in their study found that isolated children reported least supportive relationships with their fathers than sociometric stars and average chosen.

**Table 31. Pre Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Adjustment Inventory**

S No.	Sociometric Groups	N	Home Adjustment		Health Adjustment		Submissionness- Self Assertion		Emotionality		Hostility- Friendliness		Masculinity-Femininity			
			Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.	Sex	Mean	S.D.	
1.	Sociometric Stars	125	23.06	3.98	23.60	3.99	23.36	4.02	22.56	3.91	22.92	4.16	M (59)	36.05	7.62	
2.	Average Chosen	125	38.21	5.25	39.15	5.08	38.40	5.90	39.04	6.00	39.39	5.16	F (66)	29.09	7.01	
3.	Social Isolates	125	59.44	7.50	58.85	6.72	57.16	7.07	56.40	6.86	43.38	7.25	M (60)	24.60	3.46	
			1 Vs 2	25.67***	26.12***	26.36***	25.92***	23.50***	47.66***	25.75***	27.92***	27.28***	M	3.19***	F	
			1 Vs 3	47.87***	50.36***	53.65***	22.60***	21.17***	5.02***	47.66***	5.02***	5.02***	10.50***	1.53***	10.50***	7.09***
			2 Vs 3	25.89***									8.21***		6.27***	
t-values																

According to manual those individuals who score high on home adjustment feel that the home relationships have been unsatisfactory. The maximum possible score on home adjustment was 70. The mean pre test score of social isolates was 59.45 and it was significantly higher than mean scores of average chosen (38.29) and sociometric stars (23.06). This result shows that home relationships of social isolates were unsatisfactory.

**Kundu and Maiti (1985)** showed that isolated children differs uniquely from sociometric stars and average chosen in some important family cultural and environmental factors. Similarly **Aparajita and Chetana (1995)** showed that parent child relationships were very poor among social isolates as compared to sociometric stars. The above results indicate that social isolates were inferior to average chosen and sociometric stars in home adjustment.

Health is a state of complete physical and social well being not merely absence of disease or deformity. Good health depend upon many factors such as hereditary, the emotional stress and willing to adjust with one's conditions.

High scores on health adjustment indicate unsatisfactory health adjustment; low scores indicate satisfactory adjustment. The maximum possible score on health adjustment is 70. The mean health adjustment score of social isolates was 58.85. The mean pre test score of social isolates was significantly higher than the mean scores of average chosen and sociometric stars. The differences were significant at 0.001 level. A healthy person is likely to be a happy cheerful person and these characteristics contribute to social acceptance, poor health tends to make the individual socially maladjusted and thus leads to social isolation.

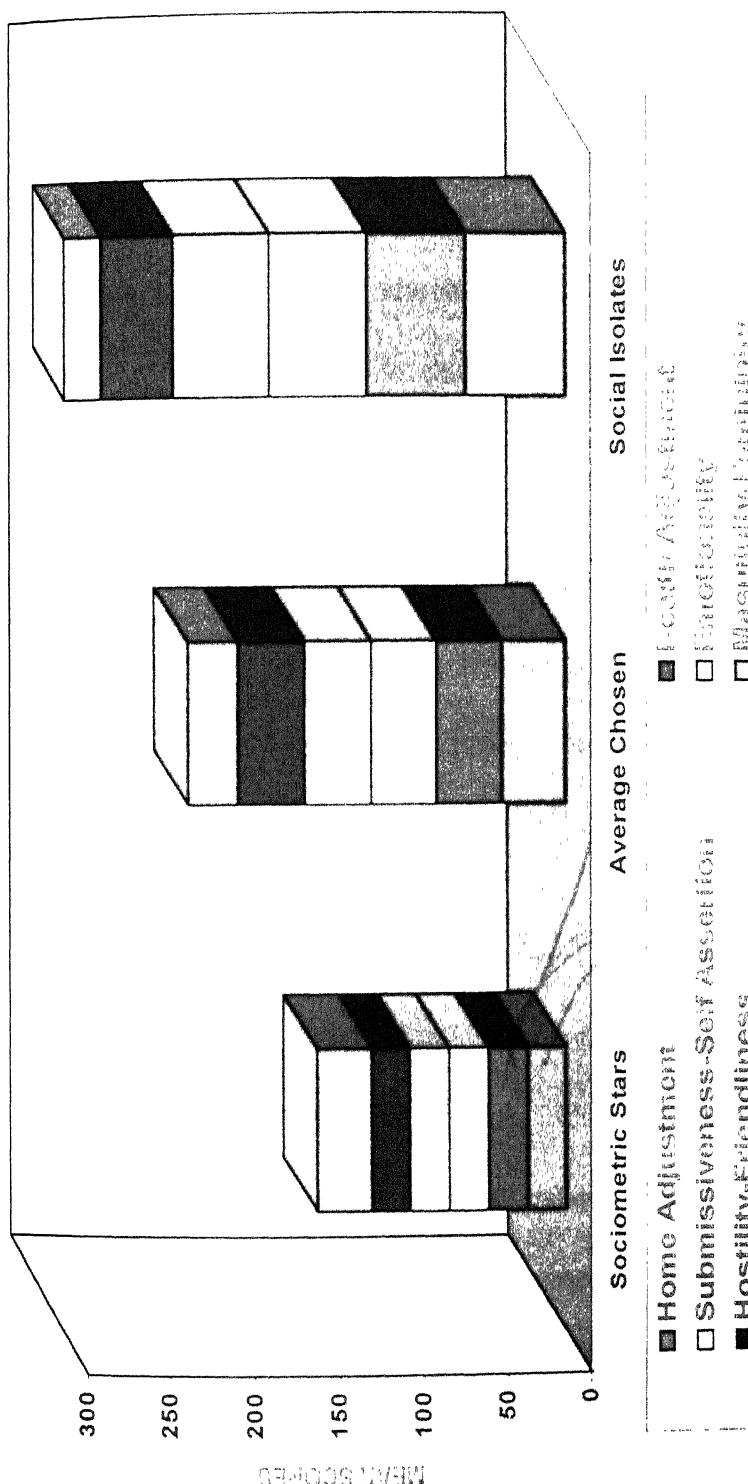


Fig.15. Pre Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Adjustment Measures

In pre test social isolates obtained the highest mean score on submissiveness followed by average chosen and sociometric stars. Sociometric stars had the lowest mean score compared to average chosen and social isolates. Individuals with very low score on submissiveness are usually very self confident and they are disturbed little by what others think of them.

Subjects who make high scores on submissiveness do not usually participate in student activities in classes, while students who make low scores do.

**Arora (1974)** reported that persons who were submissive and dependent are rejected by others. In another study **Parker and Asher (1987)** found that isolates react with timidity, nervousness and often feel insecure.

Mean values of social isolates in the present study indicates their lack of confidence in several social situations or roles. t-values showed the significant differences at 0.001 level between sociometric stars and average chosen; and also between sociometric stars and social isolates. In pre test there was significant difference in the mean scores of average chosen and social isolates on submissiveness at 0.001 level. Mean scores indicated in table 31, showed that sociometric stars were significantly better in self-assertion than average chosen and social isolates.

**Sharma (1970)** also found that sociometric stars were more assertive, vigorous and confident than the isolates who were more submissive and nonconfident.

According to **Bell (1962)** much of a individual's excessive self-consciousness may be overcome if he gets into an action programme that strengthens his social skills. As he develops understanding and skill in dealing with his group situations, these experiences become signs to him that he is improving that in turn increases in self confidence.

The degree of social acceptance a person enjoys influences his emotional warmth toward others. Sociometric stars were able to display their emotional reactions toward others quite freely and overtly. The inability of the social isolates to join the group emotionally makes them "emotional outsiders" and increases their isolation (**Hurlock, 1978**).

**Gottman et al. (1975)** observed that sociometric stars are mature emotionally. Their emotional maturity is apparent in well-controlled, even-tempered behaviour, free from anxiety, temper outbursts or displays of jealousy.

From the table, it was evident that sociometric stars obtained significantly lower score on emotionality than average chosen and social isolates. Social isolates secured higher mean score than average chosen and sociometric stars. As per the manual individuals with low score tend to be

emotionally secure. Individuals with high score tend to be unstable emotionally. A high score on this section of the inventory is symptomatic of more general unresolved problems of learning to accept, express and control one's emotions.

So in order to improve emotional development of social isolates, intervention should be implemented. It was evident from the table that sociometric stars significantly differed at 0.001 level with average chosen and social isolates. Significant difference was also found between average chosen and social isolates at 0.001 level.

Hostility is an explicit verbal response involving negative feelings and negative evaluation of people and events. Friendship is standardized as voluntary, close enduring social relationship. Friendship is considered not only natural but also valuable. Friendship is one of the factors which influence socialization of people and events. The maximum possible score on hostility is 60.

Subjects who score high on hostility tend to show that they were more hostile and critical in social relationships; and low score indicates their ability to make friends easily. Sociometric stars secured lower mean scores on hostility than average chosen and social isolates. This shows the sociometric stars' ability to make good friendship.

In a study **Hartup (1983)** observed that sociometric stars tend to be friendly, socially visible, outgoing in their behaviour and reinforcing interactions with others. **Prabhakara Rao (1969)** found that the characteristics such as friendliness and easy going were found to be associated with sociometric stars.

In the present study also in pre test sociometric stars were significantly superior than average chosen and social isolate and the difference in both the cases was significant at 0.001 level on hostility-friendliness measure. Significant difference at 0.001 level was also found between mean hostility-friendliness scores of average chosen and social isolates. The hostile individual experience considerable frustration and rejection by peer group. So there is a need to intervene social isolates to reduce their hostility score and to make them friendly.

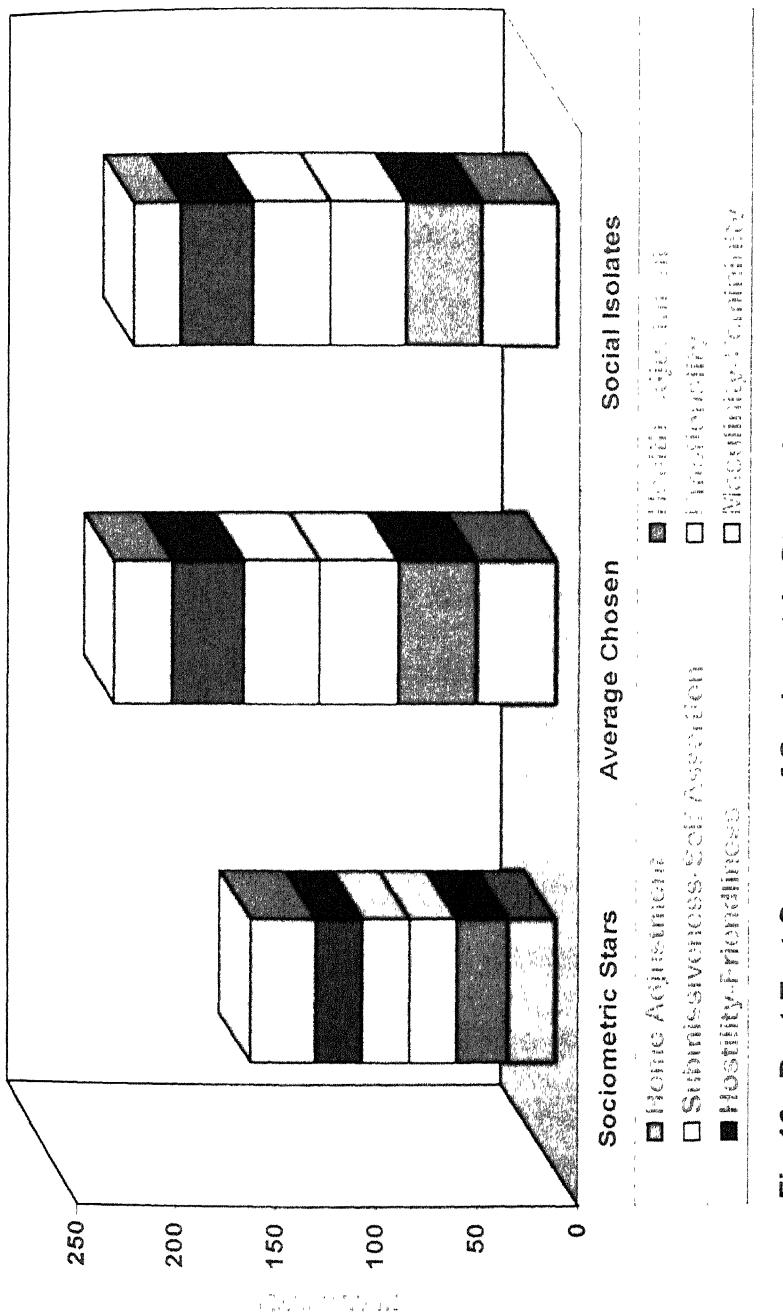
On masculinity - femininity measure among boys significant differences were observed between sociometric stars and social isolates. Sociometric stars had significantly higher mean masculinity score than average chosen and social isolates. Similarly average chosen had obtained significantly higher mean masculinity score than social isolates. The differences were significant at 0.001 level. It was also evident that among girls significant differences were observed between sociometric stars and social isolates and also between average chosen and social isolates on masculinity-femininity. Social isolate girls had higher mean femininity score than sociometric stars and average chosen. However among girls no significant difference was observed between sociometric stars and average chosen on masculinity-femininity measure.

#### **4.9.2 Post Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Adjustment**

The mean post test scores of sociometric stars, average chosen and social isolates on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity were presented in table 32 and Figure 16. Similarly as in pre test, in post test also sociometric stars and social isolates differed significantly at 0.001 level on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity. In post test after implementation of intervention strategies, mean scores of social isolates on each area of adjustment were improved. After intervention even though improvement in all measures of adjustment were seen, social isolates were significantly lower in all adjustments than sociometric stars.

In pre test significant differences were observed between average chosen and social isolates in all measures of adjustment. In pre test average chosen had showed better adjustment compared to social isolates. Whereas in post test social isolates showed better home adjustment than average chosen and the difference was significant at 0.05 level. In other measures like health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness, no significant differences were observed between social isolates and average chosen. This was due to the improvement of adjustments in social isolates after receiving intervention. However average chosen had significantly higher score than social isolates on masculinity-femininity measure.

Table 32. Post Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Adjustment Inventory



**Fig.16. Post Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Adjustment Measures**

After intervention social isolates showed marked improvement in each area of adjustment except on masculinity-femininity than average chosen. Cox (1953) also found that after intervention through play therapy experimental group showed a significant increase in adjustment and in sociometric status.

#### **4.10 COMPARISON OF PRE TEST AND POST TEST ADJUSTMENT SCORES OF SOCIOMETRIC STARS, AVERAGE CHOSEN AND SOCIAL ISOLATES**

The mean pre test and post test scores of sociometric stars, average chosen and social isolates on adjustment were presented in table 33. It was evident that there were no significant differences between pre test and post test scores of sociometric stars on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity.

No significant differences were found between pre test and post test scores of average chosen on home adjustment, health adjustment, submissiveness-self assertion, emotionality, and masculinity-femininity. However slight change was observed in mean scores of hostility-friendliness. The difference between pre test and post test mean hostility score of average chosen was 3.96. Eventhough intervention was not received by average chosen this change might be due to the influence of some environmental factors.

**Table 33. Pre and Post Test Scores of Sociometric Stars, Average Chosen and Social Isolates on Adjustment Inventory**

Sociometric Groups	Measure	N	Pre Test		Post Test		Diff. in Mean values	t-values
			Mean	S.D.	Mean	S.D.		
Sociometric Stars	Home Adjustment	125	23.06	3.98	23.26	4.32	0.20	0.46@
	Health Adjustment		23.60	3.99	25.47	18.47	1.87	1.14@
	Submissiveness-Self assertion		23.36	4.02	23.24	3.82	0.12	0.28@
	Emotionality	M(59)	22.56	3.91	23.33	4.24	0.77	1.80@
	Hostility-Friendliness		22.92	4.16	23.36	3.96	0.44	0.94@
	Masculinity-Femininity	F(66)	36.05	7.62	36.12	7.68	0.07	0.07@
Average chosen	Home Adjustment	125	38.21	5.25	39.28	5.95	1.07	1.72@
	Health Adjustment		39.15	5.08	38.78	6.83	0.37	0.53@
	Submissiveness-Self assertion		38.40	5.90	39.30	6.36	0.90	1.30@
	Emotionality	M(62)	39.04	6.00	37.70	7.07	1.34	1.88@
	Hostility-Friendliness		39.39	5.16	35.43	7.38	3.96	5.94**
	Masculinity-Femininity	F(63)	31.91	6.08	31.82	6.09	0.09	0.08@
Social Isolates	Home Adjustment	125	59.44	7.50	37.50	7.95	21.94	21.89**
	Health Adjustment		58.85	6.72	37.35	8.29	21.50	22.91**
	Submissiveness-Self assertion		57.16	7.07	37.74	7.75	19.42	21.36**
	Emotionality	M(60)	56.40	6.86	38.30	7.52	18.10	19.70**
	Hostility-Friendliness		43.38	7.25	36.20	7.45	7.18	8.03**
	Masculinity-Femininity	F(65)	24.60	3.46	26.12	4.01	1.52	2.20*
			22.43	2.91	20.81	3.01	1.62	3.12**

@ Not significant.

\* Significant at 0.05 level of significance.

\*\* Significant at 0.01 level of significance.

\*\*\* Significant at 0.001 level of significance.

The mean pre test scores of social isolates on home adjustment, health adjustment, submissiveness-self assertion, emotionality and hostility-friendliness were 59.44, 58.85, 57.16, 56.40, 43.38 respectively. After implementation of intervention in post test the obtained mean scores were 37.50, 37.35, 37.74, 38.30, 36.20 for home adjustment, health adjustment, submissiveness-self assertion, emotionality and hostility-friendliness respectively. The differences between pre test and post test were significant at 0.001 level.

In post test the mean scores of social isolates on each area of adjustment were reduced. Decrease in mean adjustment scores indicates improvement in adjustment. The difference between pre test and post test mean scores were 21.94, 21.50, 19.42, 18.10 and 7.18 respectively for home adjustment, health adjustment, submissiveness - self assertion, emotionality and hostility-friendliness.

Significant differences were observed between pre test and post test scores of boys among social isolates at 0.05 level on masculinity-femininity. Significant difference was also observed between pre test and post test scores of girls among social isolates at 0.01 level on masculinity-femininity. It was evident from mean values of social isolates that after intervention mean scores of boys were increased and of girls were reduced. In other words masculinity of boys and femininity of girls increased. This significant improvement in adjustment of post test scores of social isolates can be attributed to the intervention strategies.

#### **4.11 PRE AND POST TEST SCORES OF SOCIAL ISOLATE GROUPS ON ADJUSTMENT**

Table 34 indicates the results of pre and post intervention scores of four social isolate groups on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness, and masculinity-femininity.

How much influence social acceptance has on behaviour depends on two conditions : how secure the person feels on his status in the group and how important social acceptance is to him. If a person feels secure in his status, he will feel free to act as he wishes and will not be greatly influenced by suggestions from others. The insecure person will be afraid to express himself until he sees how others are behaving and then he will follow the crowd. The stronger the person's motivation to gain status and, hence, the greater his dependence on the group, the greater his susceptibility to influence from group members, especially those with high status (**Tiktin and Hartup, 1965**).

In order to improve social skills of social isolates peer oriented intervention strategy was designed and implemented on the first group of social isolates.

In peer oriented intervention strategy social isolates were encouraged to accept their friends as they were and to appreciate their friend's styles, to talk about things that interest their peers. In this strategy the subjects were given opportunities to share their present and past experiences with their friends. This sharing of experiences strengthens the expression of emotions which is the essential factor for social acceptance.

Table 34. Pre and Post Test Scores of Social Isolate Groups on Adjustment Inventory

Social Isolate Group	Measure	N	Pre Test		Post Test		Diff. in Mean values	t-values
			Mean	S.D.	Mean	S.D.		
First (Peer Oriented)	Home Adjustment	50	61.04	6.85	41.40	5.07	19.64	15.80***
	Health Adjustment		60.70	5.22	42.10	5.59	18.60	16.33***
	Submissiveness-Self assertion		59.28	5.92	41.90	4.85	17.38	14.48***
	Emotionality		57.40	6.01	42.42	4.36	14.98	12.67***
	Hostility-Friendliness		46.52	5.25	39.88	4.03	6.64	7.49***
	Masculinity-Femininity		M(15)	24.70	3.86	26.20	4.01	1.50
		F(35)	22.66	3.72	22.00	3.98	0.66	0.72@
Second (Parent Oriented)	Home Adjustment	25	61.24	3.18	42.16	6.19	19.08	14.36***
	Health Adjustment		61.00	4.62	41.28	5.53	19.72	18.90***
	Submissiveness-Self assertion		58.72	6.02	41.12	4.90	17.60	12.70***
	Emotionality		60.80	4.66	42.12	4.10	18.68	13.97***
	Hostility-Friendliness		40.40	9.68	39.92	5.70	0.48	0.26@
	Masculinity-Femininity		M(15)	24.02	3.25	24.08	2.79	0.06
		F(10)	22.00	2.99	20.94	2.68	1.06	0.84@
Third (Teacher Oriented)	Home Adjustment	25	50.64	7.76	35.84	4.12	14.80	8.56***
	Health Adjustment		50.56	7.29	36.24	3.80	14.32	8.65***
	Submissiveness-Self assertion		50.60	7.04	37.44	3.29	13.16	8.83***
	Emotionality		49.68	7.41	37.44	2.92	12.24	6.88***
	Hostility-Friendliness		40.40	5.60	36.20	3.79	4.20	3.44***
	Masculinity-Femininity		M(15)	25.60	4.81	28.12	2.53	2.52
		F(10)	23.06	3.99	19.92	2.60	3.14	2.08@
Fourth (Peer-Parent-Teacher Oriented)	Home Adjustment	25	63.24	4.47	26.76	6.43	36.48	20.55***
	Health Adjustment		61.24	3.69	25.00	4.89	36.24	28.33***
	Submissiveness-Selfassertion		57.90	6.63	26.28	6.48	31.62	18.24***
	Emotionality		56.88	4.84	27.16	6.90	29.72	16.32***
	Hostility-Friendliness		43.08	7.14	25.24	6.24	17.84	7.60***
	Masculinity-Femininity		M(15)	24.10	3.27	26.08	2.93	1.98
		F(10)	22.00	3.34	20.36	2.88	1.64	1.17@

@ Not significant.

\* Significant at 0.05 level of significance.

\*\* Significant at 0.001 level of significance.

Though play is a universal activity of childhood, Indian parents and teachers view it as a purposeless and useless activity. However, it is one of the firmly established principles of psychology that play is very essential for the process of development of a child. Through play, children develop their emotional and social skills (**Schaefer and Conner, 1983**). So, both indoor and outdoor games were organised in peer oriented intervention strategy.

It can be seen from table that there were significant differences between pre test and post test scores of first group of social isolates on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness at 0.001 level. The social isolates who received peer oriented intervention strategy secured significantly lower mean scores showing significantly better adjustment in post test compared to pre test. There was no significant difference between pre test and post test scores of first group of social isolates on masculinity-femininity.

The second type of intervention strategy designed and implemented was parent oriented strategy. The members of the family play a significant role in teaching children to adjust to their problems. Certain factors in the child's interaction with the family are of particular importance during childhood. For example, parental support and guidance as well as how parents meet the child's needs for security, trust and understanding are extremely significant when one examines the quality of family relationships. Children who receive such supportive treatment have a tendency to exhibit smoother patterns of emotional stability and adjustment than youngsters who have been rejected by their parents (**Riccuita, 1968; Walters and Stinnett, 1971**).

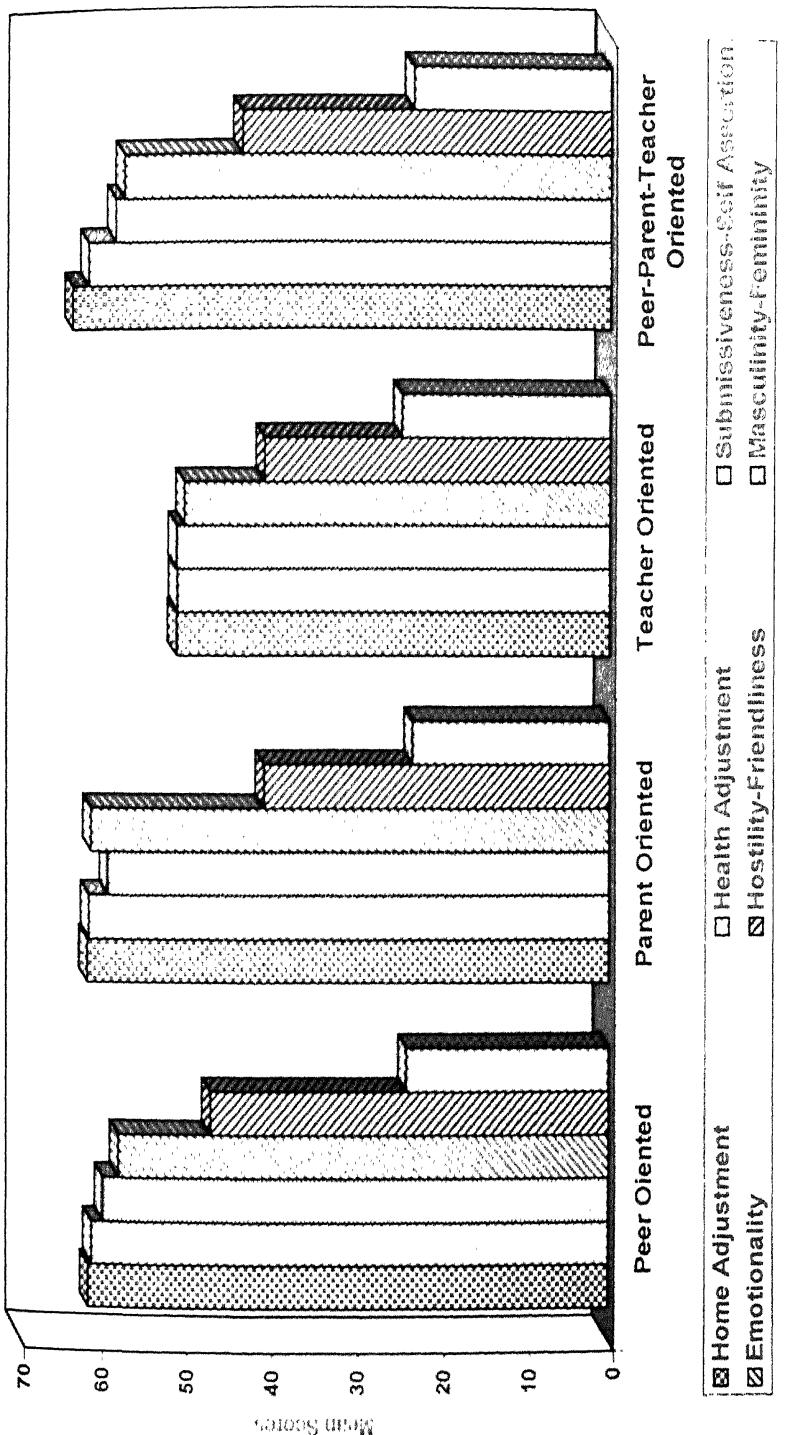
It should be noted that the child must experience and learn to deal with negative emotions as well as the so-called positive emotions in order for psychological growth to occur. Experiencing a favourable home environment and a positive emotional climate are critical influences in the child's personality and social development (**Walters and Stinnet, 1971**).

As **Warnath (1955)** concludes "The home appears indeed to be a seat of learning for the development of social skills and perhaps of the desire to participate in activities with other individuals".

**Mansdorf (1986)** observed that parent training programmes are very important for their childrens' social development. He maintained that social interactions of children can be strengthened by feedback, support and encouragement from parents.

When children are given reasonable freedom, they are found to be resourceful, co-operative, self-reliant and well-adjusted in social situations (**Laxmi Devi, 1998**).

In the second group of social isolates who received parent oriented intervention strategy, significant differences were observed between pre test and post test scores on home adjustment, health adjustment, submissiveness-self assertion and emotionality at 0.001 level. Whereas no significant differences were found between pre test and post test scores of second group of social isolates on hostility-friendliness and masculinity-femininity.



**Fig. 17. Pre Test Scores of Social Isolate Groups on Adjustment Measures**

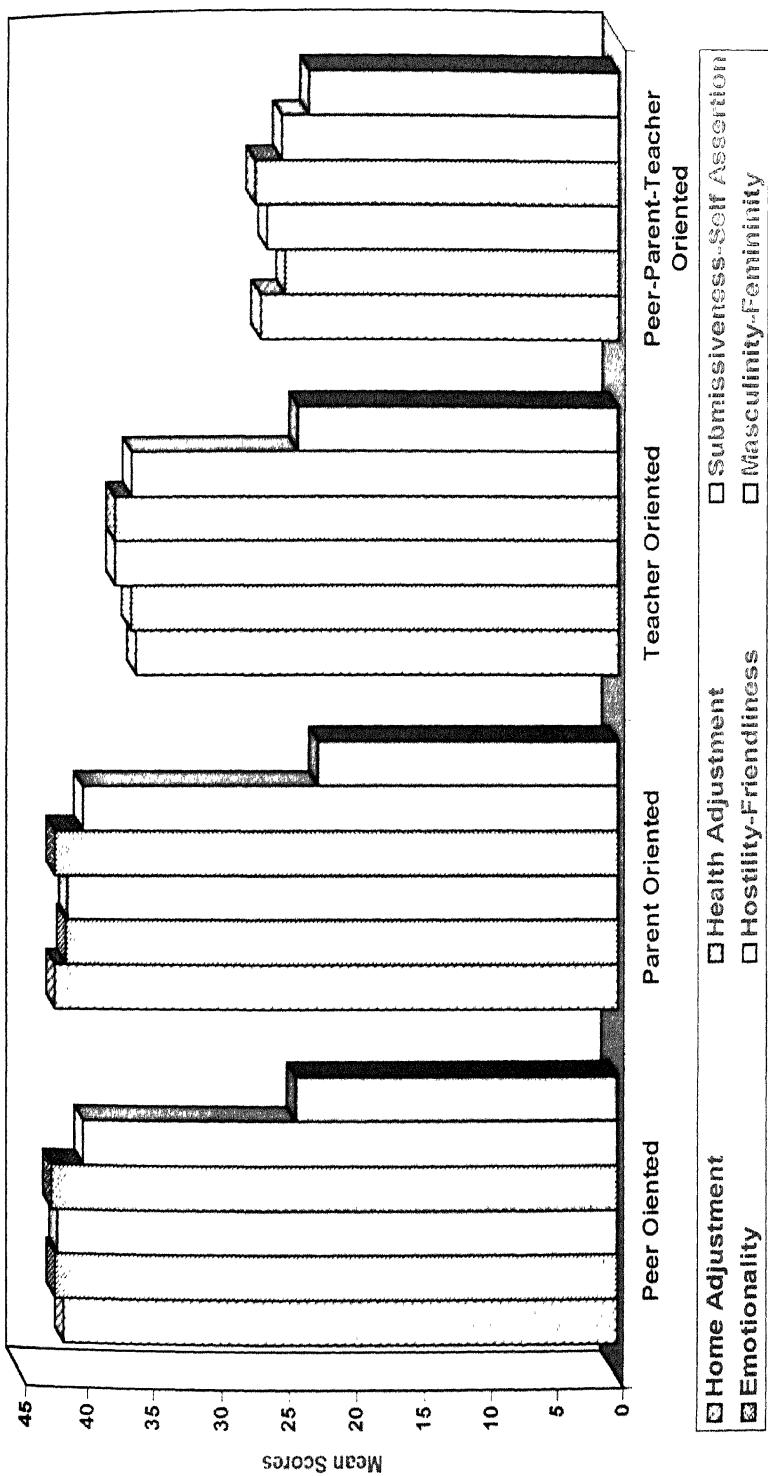


Fig. 18. Post Test Scores for Social Isolate Groups on Adjustment Measures

In post test second group of social isolates obtained significantly lower mean scores than pre test. Lower score indicate better adjustment on home adjustment, health adjustment, submissiveness - self assertion and emotionality.

The results of the present study corroborates results obtained by **Marg (1979)** who investigated the effectiveness of two components of parent training programmes. The results indicate that the significant greater reduction of inappropriate behaviour was seen among children of parents who received training than who had not received training.

Similarly in operant training procedures described by **Mansdorf (1986)** included social reinforcement via praise by mother where positive behaviour was noted.

Next to home, the school is the most important experience in the life of the children. Children spend sizable portion of their time in schools. The third intervention strategy planned and implemented was teacher oriented strategy.

According to **Walter and Ashton (1980)** because children are still very dependent upon their families, many become attached to or are awed by their teacher. This is not only because the teacher acts in many respects as a substitute parent but because the teacher conveys to the child the assurance that adult authority is trust worthy and that the school environment is safe, stimulating, and satisfying. In fulfilling these and other needs, teachers begin to exert strong influences on the child's behaviour.

In teacher oriented intervention strategy, some exercises were given to social isolates to improve their concentration and to increase memory power. By following peer pairing procedure, social involvement of social isolates was improved.

The lower mean in post test scores of the social isolates on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity than pre test scores shows significant improvement in adjustment after intervention. The increase in post test score may be attributed to the teacher oriented intervention strategy.

To the fourth group of social isolates all the three strategies (peer oriented, parent oriented and teacher oriented) together were implemented. Significant differences at 0.001 level were observed between pre test and post test scores of fourth group of social isolates who received peer-parent-teacher oriented intervention on home adjustment, health adjustment, submissiveness-self assertion, emotionality and hostility-friendliness. However no significant difference was observed on masculinity-femininity measure.

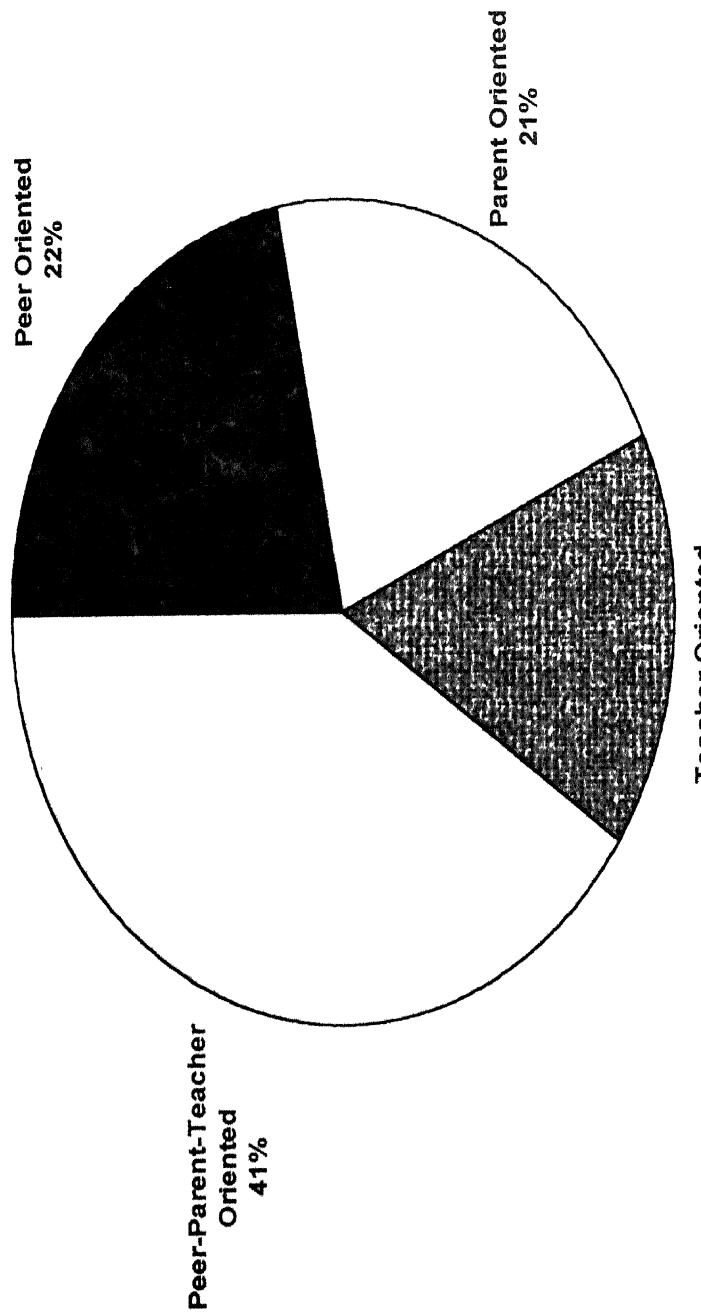
Alround development of an individual influences on their environment and also on the people who are present in their surroundings like peers, parents and teachers. Combined influence of peers, parents and teachers was greater than the influence of only peers, only parents and only teachers. This was evident from the mean values of four groups of social isolates who were given peer oriented, parent oriented, teacher oriented and peer-parent-teacher oriented intervention strategies.

Table 35 shows mean pre test and post test difference on home adjustment scores of different social isolate groups. Pre and post test difference mean score on home adjustment (36.48) was highest in fourth group of social isolates who received peer-parent-teacher oriented strategy. Mean difference score of peer oriented group was 19.64 and parent oriented group was 19.08. Compared to other intervention strategies the mean difference score (14.80) was lower in teacher oriented intervention strategy.

**Table 35. Difference Mean (Post Test-Pre Test), S.D. Values of Social Isolate Groups on Home Adjustment**

Strategy	N <sub>1</sub>	Mean	S.D.	N <sub>2</sub>	Mean	S.D.	t-values
Peer Vs Parent Oriented	50	19.64	8.79	25	19.08	6.65	0.28@
Peer Vs Teacher Oriented	50	19.64	8.79	25	14.80	8.64	2.26*
Peer Vs Peer-Parent-Teacher Oriented	50	19.64	8.79	25	36.48	8.88	7.80***
Parent Vs Teacher Oriented	25	19.08	6.65	25	14.80	8.64	1.96*
Parent Vs Peer-Parent-Teacher Oriented	25	19.08	6.65	25	36.48	8.88	7.85***
Teacher Vs Peer-Parent-Teacher Oriented	25	14.80	8.64	25	36.48	8.88	8.75***

To know the significant differences between different social isolate groups t-values were calculated. There were significant differences between different social isolate groups except between social isolate groups who received peer oriented and parent oriented intervention strategies.



**Fig. 19. Pre and Post Test Mean Scores Difference of Social Isolate Groups on Home Adjustment**

The fourth group of social isolates who received peer-parent-teacher oriented intervention strategy showed significant improvement compared to peer, parent, teacher oriented groups and the differences were significant at 0.001 level. Social isolates who received teacher oriented intervention strategy showed significantly lesser mean difference compared to other three groups. No significant difference was observed between peer oriented and parent oriented groups. Peer-parent-teacher oriented strategy had better impact on improving home adjustment of social isolates.

Table 36 shows mean pre test and post test difference on health adjustment scores of different social isolate groups. Mean difference between pre test and post test scores on health adjustment (36.20) was highest in fourth group of social isolates who received peer-parent-teacher oriented strategy. Pre and post test mean difference score of parent oriented group was 19.72 and peer oriented group was 18.62. Compared to other intervention strategies the mean difference score (14.32) was lower in teacher oriented intervention strategy.

To know the significant differences between different social isolate groups t-values were calculated. There were significant differences between different social isolate groups except between social isolate groups who received peer oriented and parent oriented intervention strategy.

The fourth group of social isolates who received peer-parent-teacher oriented intervention strategy showed significant improvement compared to peer, parent, teacher oriented groups and the differences were significant at 0.001 level. Social isolates who received teacher oriented intervention strategy showed significantly lesser mean difference compared to other three groups. No significant difference was observed between peer oriented and parent oriented isolate groups. Peer-parent-teacher oriented strategy had better impact on improving health adjustment of social isolates.

**Table 36. Difference Mean (Post Test-Pre Test), S.D. Values of Social Isolate Groups on Health Adjustment**

Strategy	N <sub>1</sub>	Mean	S.D.	N <sub>2</sub>	Mean	S.D.	t-values
Peer Vs Parent Oriented	50	18.62	8.06	25	19.72	5.21	0.62 <sup>®</sup>
Peer Vs Teacher Oriented	50	18.62	8.06	25	14.32	8.28	2.16 <sup>*</sup>
Peer Vs Peer-Parent-Teacher Oriented	50	18.62	8.06	25	36.20	6.39	9.50***
Parent Vs Teacher Oriented	25	19.72	5.21	25	14.32	8.28	2.76**
Parent Vs Peer-Parent-Teacher Oriented	25	19.72	5.21	25	36.20	6.39	10.00***
Teacher Vs Peer-Parent-Teacher Oriented	25	14.32	8.28	25	36.20	6.39	10.46***

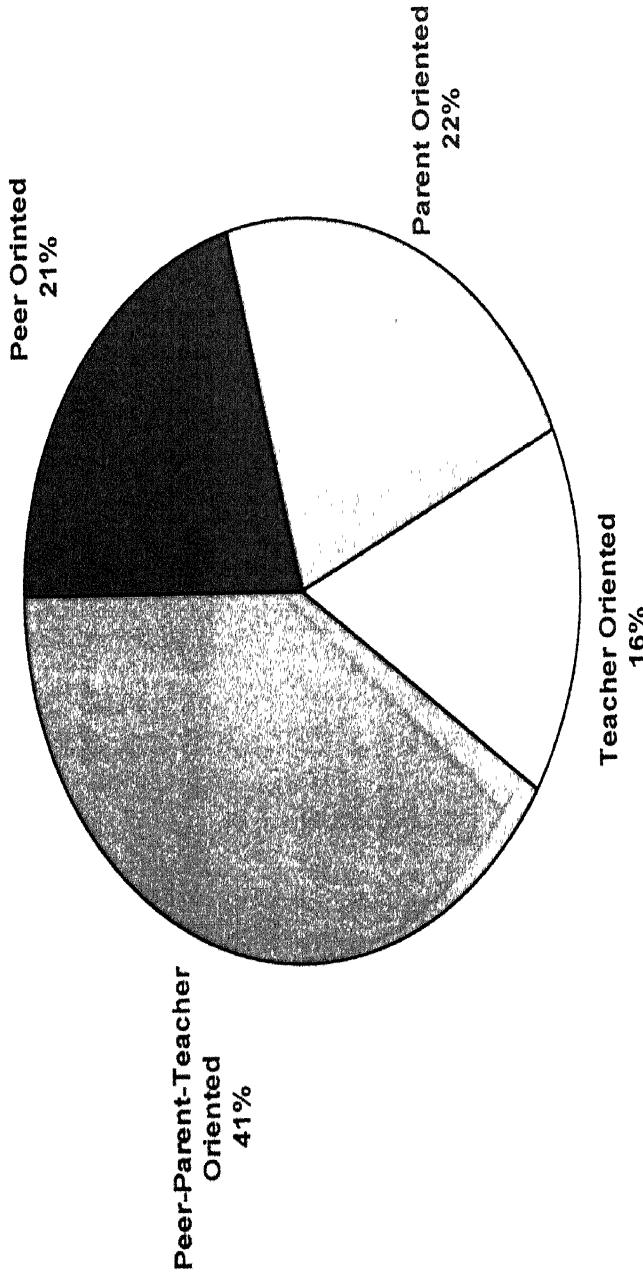
Table 37 shows mean post test and pre test difference on submissiveness-self assertion scores of different social isolate groups. Pre and post test mean scores difference on submissiveness-self assertion (31.64) was highest in fourth group of social isolates who received peer-parent-teacher

oriented strategy. Mean difference score of parent oriented group was 17.60 and peer oriented group was 17.36. Compared to other intervention strategies the mean difference score (13.16) was lower in teacher oriented intervention strategy.

**Table 37. Difference Mean (Post Test - Pre Test), S.D. Values of Social Isolate Groups on Submissiveness - Self Assertion**

Strategy	N <sub>1</sub>	Mean	S.D.	N <sub>2</sub>	Mean	S.D.	t-values
Peer Vs Parent Oriented	50	17.36	8.48	25	17.60	6.93	0.12@
Peer Vs Teacher Oriented	50	17.36	8.48	25	13.16	7.45	2.10*
Peer Vs Peer-Parent-Teacher Oriented	50	17.36	8.48	25	31.64	8.67	6.82***
Parent Vs Teacher Oriented	25	17.60	6.93	25	13.16	7.45	2.18*
Parent Vs Peer-Parent-Teacher Oriented	25	17.60	6.93	25	31.64	8.67	6.32***
Teacher Vs Peer-Parent-Teacher Oriented	25	13.16	7.45	25	31.64	8.67	8.08***

To know the significant differences between different social isolate groups, t-values were calculated. There were significant differences between different social isolate groups except between social isolate groups who received peer oriented and parent oriented intervention strategy.



**Fig. 20. Pre and Post Test Mean Scores Difference of Social Isolate Groups on Health Adjustment**

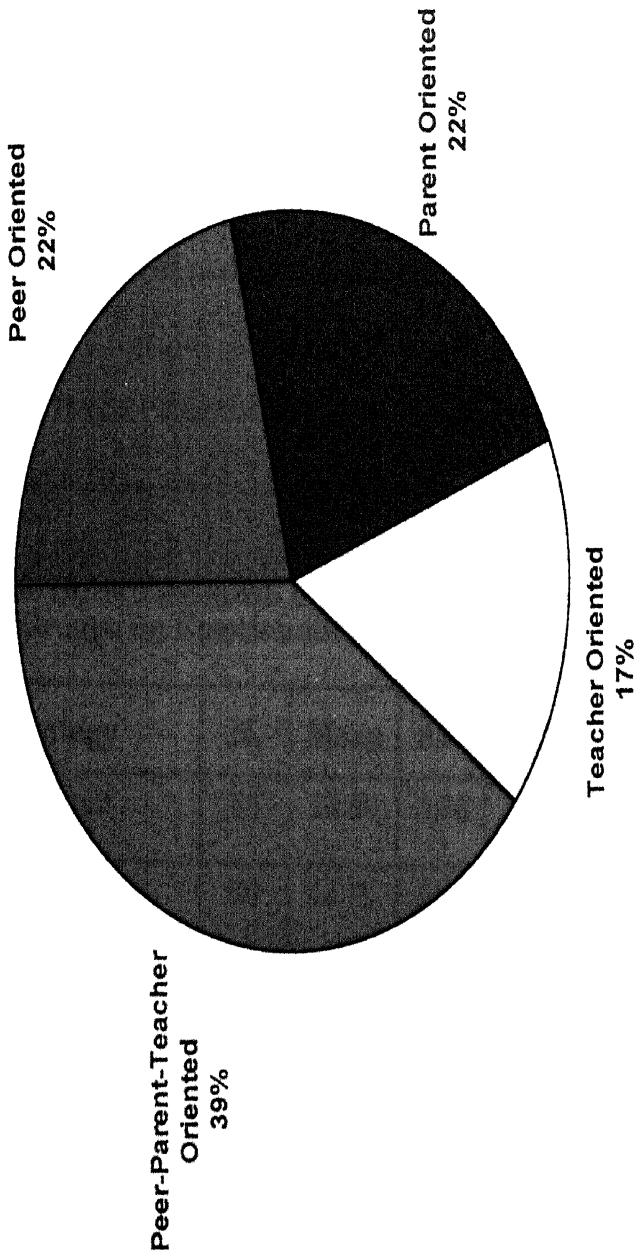


Fig. 21. Pre and Post Test Mean Scores Difference of Social Isolate Groups on Submissiveness-Self Assertion

The fourth group of social isolates who received peer-parent-teacher oriented intervention strategy showed significant improvement compared to peer, parent, teacher oriented groups and the differences were significant at 0.001 level. Social isolates who received teacher oriented intervention strategy showed significantly lesser mean difference compared to other three groups. Peer-parent-teacher oriented strategy had better impact on improving self assertion of social isolates.

Table 38 shows the mean pre test and post test difference on emotionality scores of different social isolate groups. Pre and post test mean scores difference on emotionality (29.72) was highest in fourth group of social isolates who received peer-parent-teacher oriented strategy. Mean difference score of parent oriented group was 18.68 and peer oriented group was 14.98. Compared to other intervention strategies the mean difference score (12.24) was lower in social isolates of teacher oriented intervention strategy.

**Table 38. Difference Mean (Post Test-Pre Test), S.D. Values of Social Isolate Groups on Emotionality**

Strategy	N <sub>1</sub>	Mean	S.D.	N <sub>2</sub>	Mean	S.D.	t-values
Peer Vs Parent Oriented	50	14.98	8.36	25	18.68	6.69	1.93@
Peer Vs Teacher Oriented	50	14.98	8.36	25	12.24	8.89	1.31@
Peer Vs Peer-Parent-Teacher Oriented	50	14.98	8.36	25	29.72	9.11	6.99***
Parent Vs Teacher Oriented	25	18.68	6.69	25	12.24	8.89	2.89***
Parent Vs Peer-Parent-Teacher Oriented	25	18.68	6.69	25	29.72	9.11	4.89***
Teacher Vs Peer-Parent-Teacher Oriented	25	12.24	8.89	25	29.72	9.11	6.87***

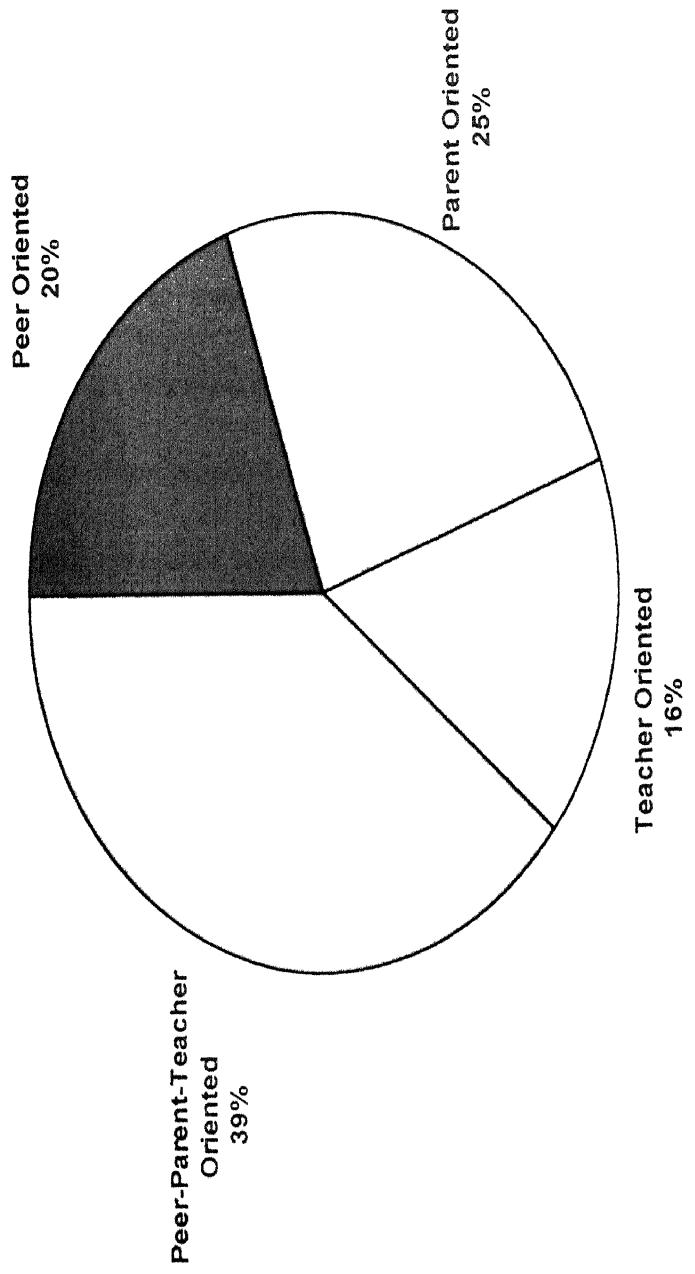


Fig. 22. Pre and Post Test Mean Scores Difference of Social Isolate Groups on Emotionality

To know the significant differences between social isolate groups t-values were calculated. It was evident from the Table 38 that there were significant differences between different social isolate groups except between social isolate groups who received peer oriented and parent oriented intervention strategy and also between peer oriented and teacher oriented groups.

Social isolates of peer-parent-teacher oriented intervention strategy showed significant improvement compared to peer, parent, teacher oriented groups and the differences were significant at 0.001 level. Social isolates who received teacher oriented intervention strategy showed significantly lesser mean difference compared to other three groups. It was known from this table that peer-parent-teacher oriented method had better influence on improving emotionality of social isolates.

Table 39 shows mean pre test and post test difference on hostility-friendliness scores of different social isolate groups. Pre and post test mean scores difference on hostility-friendliness (17.84) was highest in fourth group of social isolates who received peer-parent-teacher oriented strategy. Mean difference score of peer oriented group was 6.64 and teacher oriented group was 4.20 compared to other intervention strategies the mean difference score (0.48) was lower in parent oriented intervention strategy.

**Table 39. Difference Mean (Post Test-Pre Test), S.D. Values of Social Isolate Groups on Hostility-Friendliness**

Strategy	N <sub>1</sub>	Mean	S.D.	N <sub>2</sub>	Mean	S.D.	t-values
Peer Vs Parent Oriented	50	6.64	6.27	25	0.48	9.17	3.42***
Peer Vs Teacher Oriented	50	6.64	6.27	25	4.20	6.11	1.60@
Peer Vs Peer-Parent-Teacher Oriented	50	6.64	6.27	25	17.84	11.73	5.41***
Parent Vs Teacher Oriented	25	0.48	9.17	25	4.20	6.11	1.69@
Parent Vs Peer-Parent-Teacher Oriented	25	0.48	9.17	25	17.84	11.73	5.83***
Teacher Vs Peer-Parent-Teacher Oriented	25	4.20	6.11	25	17.84	11.73	5.16***

To know the significant differences between different social isolate groups t-values were calculated. There were significant differences between different social isolate groups except between peer and teacher oriented groups and also between parent and teacher oriented groups.

Social isolates of fourth group who were given peer-parent-teacher oriented intervention strategy showed significant improvement compared to peer, parent, teacher oriented groups of social isolates and the differences were significant at 0.001 level. Social isolates who received parent oriented intervention strategy showed significantly lesser mean difference compared to other three groups.

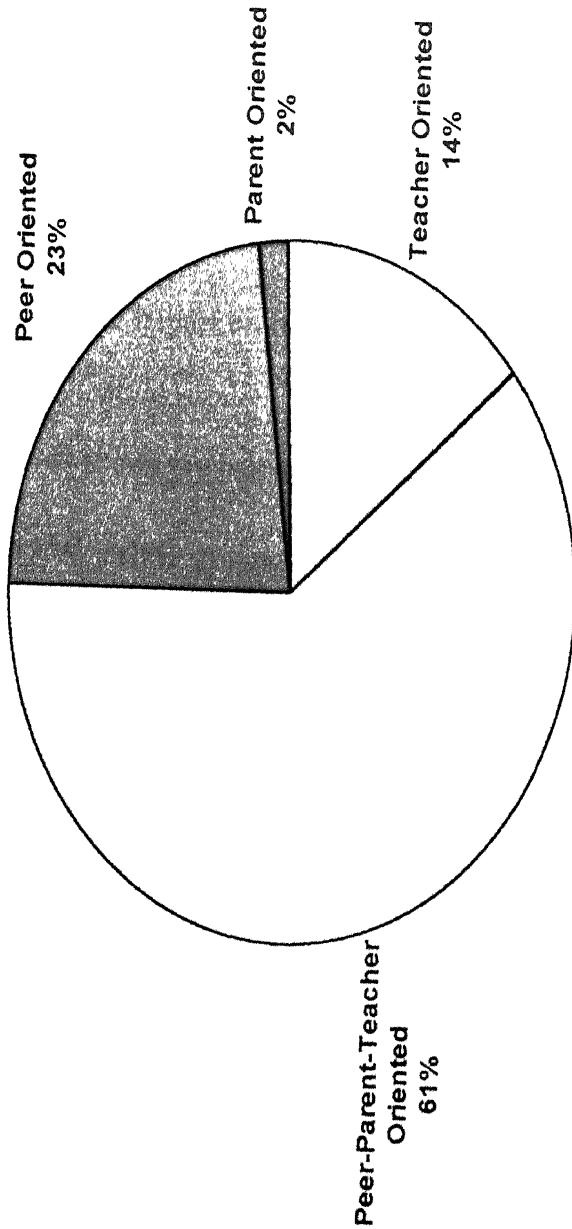


Fig. 23. Pre and Post Test Mean Scores Difference of Social Isolate Groups on Hostility-Friendliness

Lower score on hostility-friendliness measure of social isolates who were given parent oriented intervention strategy shows the lesser influence of parents on friendship formation in adolescent aged individuals. In peer oriented and teacher oriented intervention strategies, subjects had better chances to make friends in the school whereas in parent oriented strategy those chances were less. Improvement of friendship formation of children can be possible for parents in the early years of their children than in later years. Among the four types of intervention strategies peer-parent-teacher oriented method had better impact on improving friendliness.

Table 40 shows pre test and post test mean score differences and S.D. values of social isolate groups on masculinity-femininity. Majority of the males who score high on this section of the Inventory are individuals who have made a good identification with some male during childhood. Low scores for males, high scores for females indicate greater preference for masculine activities and greater preference for feminine activities and roles respectively.

**Table 40. Difference Mean (Post Test-Pre Test), S.D. Values of Social Isolate Groups on Masculinity-Femininity**

Strategy	Sex	N <sub>1</sub>	Mean	S.D.	N <sub>2</sub>	Mean	S.D.	t-values
Peer Vs Parent Oriented	Boys	15	1.50	12.09	15	0.06	9.21	0.37 <sup>@</sup>
	Girls	35	0.66	8.03	10	1.06	7.43	0.15 <sup>@</sup>
Peer Vs Teacher Oriented	Boys	15	1.50	12.09	15	2.52	7.92	0.27 <sup>@</sup>
	Girls	35	0.66	8.03	10	3.14	10.01	0.72 <sup>@</sup>
Peer Vs Peer-Parent-Teacher Oriented	Boys	15	1.50	12.09	15	1.98	9.81	0.12 <sup>@</sup>
	Girls	35	0.66	8.03	10	1.64	6.97	0.38 <sup>@</sup>
Parent Vs Teacher Oriented	Boys	15	0.06	9.21	15	2.52	7.92	0.78 <sup>@</sup>
	Girls	10	1.06	7.43	10	3.14	10.01	0.53 <sup>@</sup>
Parent Vs Peer-Parent-Teacher Oriented	Boys	15	0.06	9.21	15	1.98	9.81	0.55 <sup>@</sup>
	Girls	10	1.06	7.43	10	1.64	6.97	0.18 <sup>@</sup>
Teacher Vs Peer-Parent-Teacher Oriented	Boys	15	2.52	7.92	15	1.98	9.81	0.17 <sup>@</sup>
	Girls	10	3.14	10.01	10	1.64	6.97	0.39 <sup>@</sup>

To know the significant differences between different social isolate groups t-values were calculated. There were no significant differences between different social isolate groups.

As there were no particular activities included in intervention strategies for improvement of masculinity-femininity, not much changes were seen in masculine and feminine activities. Only lesser changes were observed in mean scores of four groups of social isolates on masculinity-femininity measure.

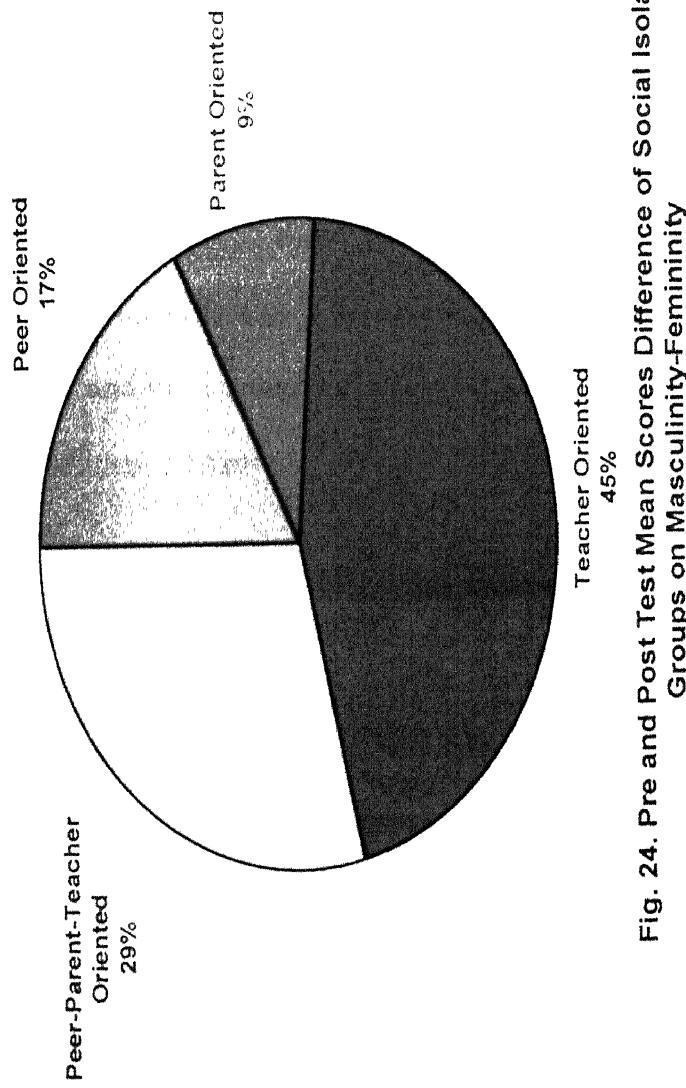


Fig. 24. Pre and Post Test Mean Scores Difference of Social Isolate Groups on Masculinity-Femininity

**4.12 COMPARISON OF PRE TEST AND POST TEST SCORES OF DIFFERENT GROUPS OF SOCIAL ISOLATES WITH AVERAGE CHOSEN AND SOCIOMETRIC STARS**

To find out the impact of intervention strategies on adjustment the scores of four groups of social isolates were compared with scores of average chosen and sociometric stars.

**4.12.1 Pre Test Scores of Average Chosen and Social Isolates on Adjustment**

It was evident from the table 41 that in pre test average chosen had shown significantly better adjustment in almost all measures of adjustment compared to four groups of social isolates. However average chosen had shown no significant difference with second group of social isolates (Parent oriented group) and third group of social isolates (Teacher oriented group) on hostility-friendliness measure.

**4.12.2 Post Test Scores of Social Isolate Groups and Average Chosen on Adjustment**

In table 42 the mean scores and S.D. values of four social isolate groups and average chosen were shown. There were significant differences between first group of social isolates and average chosen on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity. In post test adjustments on all measures of peer oriented group were progressed compared to pre test. However inspite of this progress the adjustments of social isolates on all measures were significantly lower than average chosen.

**Table 41. Pre Test Scores of Average Chosen and Social Isolates on Adjustment Measures**

Measure	Social Isolate Groups				Average Chosen (N <sub>2</sub> =125)		t-values
	Group	N	Mean	S.D.	Mean	S.D.	
Home Adjustment	First (Peer Oriented)	50	61.04	6.85	38.21	5.25	23.73***
Health Adjustment			60.70	5.22	39.15	5.08	25.16***
Submissiveness-Self assertion			59.28	5.92	38.40	5.90	21.14***
Emotionality			57.40	6.01	39.04	6.00	18.27***
Hostility-Friendliness			46.50	5.25	39.39	5.16	8.21***
Masculinity		15,62	24.70	3.86	31.91	6.08	8.58***
Femininity			35.63	3.72	27.38	5.61	4.97***
Home Adjustment	Second (Parent Oriented)	25	61.24	3.18	38.21	5.25	21.13***
Health Adjustment			61.00	4.62	39.15	5.08	19.90***
Submissiveness-Self assertion			58.70	6.02	38.40	5.90	15.67***
Emotionality			60.80	4.66	39.04	6.00	17.10***
Hostility-Friendliness			40.40	9.68	39.39	5.16	0.75@
Masculinity		15,62	24.02	3.25	31.91	6.08	6.92***
Femininity			10,63	2.99	27.38	5.61	4.56***
Home Adjustment	Third (Teacher Oriented)	25	50.60	7.76	38.21	5.25	9.90***
Health Adjustment			50.56	7.29	39.15	5.08	9.46***
Submissiveness-Self assertion			50.60	7.04	38.40	5.90	9.14***
Emotionality			49.68	7.41	39.04	6.00	7.77***
Hostility-Friendliness			40.40	5.60	39.39	5.16	0.88@
Masculinity		15,62	25.60	4.81	31.91	6.08	4.32***
Femininity			10,63	3.99	27.38	5.61	2.98***
Home Adjustment	Fourth (Peer-parent-Teacher Oriented)	25	63.24	4.47	38.21	5.25	22.26***
Health Adjustment			61.24	3.69	39.15	5.08	20.64***
Submissiveness-Self assertion			57.90	6.63	38.40	5.90	14.80***
Emotionality			56.88	4.84	39.04	6.00	13.97***
Hostility-Friendliness			43.08	7.14	39.39	5.16	3.04**
Masculinity		15,62	24.10	3.27	31.91	6.08	6.79***
Femininity			10,63	3.34	27.38	5.61	4.24***

@ Not significant.

\*\* Significant at 0.01 level of significance.

\*\*\* Significant at 0.001 level of significance.

In post test significant differences were observed between second group of social isolates (parent oriented) and average chosen on four measures of adjustment namely home adjustment, emotionality, hostility-friendliness and masculinity-femininity. In post test as in pre test, average chosen showed significantly better adjustment than social isolates on the above four measures. However compared to pre test in post test second group of social isolates (parent oriented) showed better adjustment in health and submissiveness-self assertion. No significant differences were observed between second group of social isolates and average chosen on health adjustment and submissiveness-self assertion measures.

In post test no significant differences were observed between third group of social isolates who received teacher oriented intervention strategy and average chosen on health adjustment, submissiveness-self assertion, emotionality, and hostility-friendliness. In pre test average chosen had better adjustment on these four measures. Whereas in post test, after implementation of teacher oriented intervention, third group of social isolates showed better adjustment on the above four measures and no significant difference was observed between third group of social isolates and average chosen. In pre test average chosen had significantly better home adjustment than third group of social isolates. Whereas in post test third group of social isolates (teacher oriented) showed better adjustment than average chosen. However on masculinity-femininity measure average chosen had significantly higher masculinity score compared to third group of social isolates.

**Table 42. Post Test Scores of Average Chosen and Social Isolates on Adjustment Measures**

Measure	Social Isolate Groups				Average chosen (N <sub>2</sub> =125)	t-values	
	Group	N	Mean	S.D.	Mean		
Home Adjustment	First (Peer Oriented)	50	41.40	5.07	39.28	5.95	2.22 <sup>*</sup>
Health Adjustment			42.10	5.59	38.78	6.83	3.05 <sup>**</sup>
Submissiveness-Self assertion			41.90	4.85	39.30	6.36	2.60 <sup>*</sup>
Emotionality			42.40	4.36	37.70	7.08	4.38 <sup>***</sup>
Hostility-Friendliness			39.90	4.03	35.40	7.38	4.02 <sup>***</sup>
Masculinity		15,62	26.20	4.01	31.82	6.09	4.36 <sup>***</sup>
Femininity			35,63	3.98	27.33	5.68	5.44 <sup>***</sup>
Home Adjustment	Second (Parent Oriented)	25	42.20	6.19	39.28	5.95	2.20 <sup>*</sup>
Health Adjustment			41.30	5.50	38.78	6.83	1.72 <sup>*</sup>
Submissiveness-Self assertion			41.12	4.90	39.31	6.36	1.34 <sup>*</sup>
Emotionality			42.12	4.11	37.70	7.08	3.01 <sup>**</sup>
Hostility-Friendliness			39.90	5.70	35.40	7.38	2.87 <sup>**</sup>
Masculinity		15,62	24.08	2.79	31.82	6.09	7.30 <sup>***</sup>
Femininity			10,63	2.68	27.33	5.68	5.81 <sup>***</sup>
Home Adjustment	Third (Teacher Oriented)	25	35.80	4.12	39.28	5.95	2.76 <sup>*</sup>
Health Adjustment			36.20	3.80	38.78	6.83	1.81 <sup>*</sup>
Submissiveness-Self assertion			37.40	3.29	39.30	6.36	1.43 <sup>*</sup>
Emotionality			37.40	2.92	37.70	7.08	0.19 <sup>*</sup>
Hostility-Friendliness			36.20	3.79	35.40	7.38	0.51 <sup>*</sup>
Masculinity		15,62	28.12	2.53	31.82	6.09	3.63 <sup>***</sup>
Femininity			10,63	2.60	27.33	5.68	6.80 <sup>***</sup>
Home Adjustment	Fourth (Peer-Parent-Teacher Oriented)	25	26.76	6.43	39.28	5.95	9.48 <sup>***</sup>
Health Adjustment			25.04	4.89	38.78	6.83	9.58 <sup>***</sup>
Submissiveness-Self assertion			26.28	6.48	39.30	6.36	9.33 <sup>***</sup>
Emotionality			27.16	6.90	37.70	7.08	6.84 <sup>***</sup>
Hostility-Friendliness			25.24	6.24	35.43	7.38	6.46 <sup>***</sup>
Masculinity		15,62	26.08	2.93	31.82	6.09	5.32 <sup>***</sup>
Femininity			10,63	2.88	27.33	5.68	6.06 <sup>***</sup>

@ Not significant.

\* Significant at 0.05 level of significance.

\*\* Significant at 0.01 level of significance.

\*\*\* Significant at 0.001 level of significance.

Significant differences were observed in post test between fourth group of social isolates (peer-parent-teacher oriented) and average chosen on six measures of adjustment namely home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity. In post test peer-parent-teacher oriented group showed significantly better adjustment than average chosen on the five measures of adjustment i.e., home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness. Whereas in masculinity-femininity average chosen had secured significantly higher masculinity score than fourth group of social isolates.

#### **4.12.3 Pre Test Scores of Sociometric Stars and Social Isolate Groups on Adjustment**

Table 43 shows pre test scores of sociometric stars and social isolate groups on adjustment. It was evident from the table that there were significant differences at 0.001 level between all social isolate groups and sociometric stars on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity. Sociometric stars were significantly better adjusted and secured lower mean scores on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness than social isolate groups. Among sociometric stars, boys secured higher masculinity score than social isolate groups.

**Grossman and Wrighters (1948)** found that sixth grade students who were very high in sociometric status secured much higher total adjustment scores on the California test of personality than did a similar group of students who were very low in sociometric status.

**Table 43. Pre Test Scores of Sociometric Stars and Social Isolates on Adjustment Measures**

Measure	Social Isolate Groups				Sociometric Stars (N <sub>2</sub> =125)		t-values
	Group	N	Mean	S.D.	Mean	S.D.	
Home Adjustment	First (Peer Oriented)	50	61.04	6.85	23.06	3.98	45.72***
Health Adjustment			60.72	5.22	23.63	3.99	50.68***
Submissiveness-Self assertion			59.28	5.92	23.36	4.02	46.30***
Emotionality			57.40	6.01	22.56	3.91	45.25***
Hostility-Friendliness		15,59	46.52	5.25	22.92	4.15	31.39***
Masculinity			24.70	3.86	36.05	7.62	8.11***
Femininity			35.66	3.72	29.09	7.01	6.00***
Home Adjustment	Second (Parent Oriented)	25	61.24	3.18	23.06	3.98	45.13***
Health Adjustment			61.00	4.62	23.63	3.99	41.62***
Submissiveness-Self assertion			58.72	6.00	23.36	4.02	36.61***
Emotionality			60.80	4.66	22.56	3.90	43.23***
Hostility-Friendliness		15,59	40.40	9.68	22.90	4.15	14.65***
Masculinity			24.02	3.25	36.05	7.62	9.25***
Femininity			10,66	2.99	29.09	7.01	5.54***
Home Adjustment	Third (Teacher Oriented)	25	50.60	7.76	23.06	3.98	26.23***
Health Adjustment			50.60	7.29	23.63	3.99	26.23***
Submissiveness-Self assertion			50.60	7.04	23.36	4.02	26.77***
Emotionality			49.68	7.41	22.56	3.91	26.58***
Hostility-Friendliness		15,59	40.40	5.60	22.90	4.15	18.05***
Masculinity			25.60	4.81	36.05	7.62	6.57***
Femininity			10,66	3.99	29.09	7.01	3.94***
Home Adjustment	Fourth (Peer-Parent-Teacher Oriented)	25	63.24	4.47	23.06	3.98	45.14***
Health Adjustment			61.24	3.69	23.60	3.99	43.60***
Submissiveness-Self assertion			57.90	6.63	23.36	4.02	34.70***
Emotionality			56.90	4.84	22.56	3.90	38.46***
Hostility-Friendliness		15,59	43.08	7.14	22.90	4.15	19.30***
Masculinity			24.10	3.27	36.05	7.62	9.19***
Femininity			10,66	3.34	29.09	7.01	5.18***

\*\*\* Significant at 0.001 level of significance.

In the present study also similar results were observed. The present investigation shows that sociometric stars were better adjusted than social isolates.

#### **4.12.4 Post Test Scores of Sociometric Stars and Social Isolate Groups on Adjustment**

Table 44 shows post test scores of four groups of social isolates and sociometric stars. In post test also like in pre test sociometric stars showed significantly better adjustment on six measures i.e. home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity. It was observed that social isolate groups differed significantly with sociometric stars on these six measures of adjustment. No significant difference was observed between fourth group of social isolates and sociometric stars on health adjustment and hostility-friendliness. Among sociometric stars boys secured better masculinity and girls secured better femininity score in both pre test and post test.

However after receiving intervention programmes, all the four groups of social isolates in post test obtained lower mean scores on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and improvement in femininity of girls and masculinity of boys. However compared to sociometric stars all the four groups of social isolates obtained higher score in post test on all measures of adjustment. This shows that even after intervention the adjustments of four groups of social isolates were significantly lower than sociometric stars. The fourth group of social isolates who received peer-parent-teacher oriented intervention strategy showed better adjustment compared to other groups of social isolates and no significant difference was observed between fourth group of social isolates and sociometric stars on health and hostility-friendliness measures.

**Table 44. Post Test Scores of Sociometric Stars and Social Isolates on Adjustment Measures**

Measure	Social Isolate Groups				Sociometric Stars (N <sub>2</sub> =125)	t-values	
	Group	N	Mean	S.D.	Mean		
Home Adjustment	First (Peer Oriented)	50	41.40	5.07	23.26	4.32	23.85***
Health Adjustment			42.10	5.59	25.47	18.47	6.24***
Submissiveness-Self assertion			41.90	4.85	23.24	3.82	27.00***
Emotionality			42.40	4.36	23.33	4.24	26.69***
Hostility-Friendliness		15,59	39.88	4.03	23.36	3.96	24.82***
Masculinity	M		26.20	4.01	36.12	7.68	6.89***
Femininity	F		35.66	3.98	29.13	7.11	6.42***
Home Adjustment	Second (Parent Oriented)	25	42.20	6.19	23.26	4.30	18.45***
Health Adjustment			41.28	5.53	25.47	18.47	4.23***
Submissiveness-Self assertion			41.00	4.90	23.24	3.80	20.35***
Emotionality			42.00	4.11	23.33	4.20	20.30***
Hostility-Friendliness		15,59	39.90	5.70	23.36	3.96	17.63***
Masculinity	M		24.08	2.79	36.12	7.68	9.79***
Femininity	F		10.66	2.68	29.13	7.11	6.71***
Home Adjustment	Third (Teacher Oriented)	25	35.80	4.12	23.26	4.32	13.38***
Health Adjustment			36.20	3.80	25.47	18.47	2.90**
Submissiveness-Self assertion			37.40	3.29	23.24	3.82	17.35***
Emotionality			37.40	2.92	23.33	4.20	15.88***
Hostility-Friendliness		15,59	36.20	3.79	23.36	3.96	14.92***
Masculinity	M		28.12	2.53	36.12	7.68	6.67***
Femininity	F		10.66	2.60	29.13	7.11	7.68***
Home Adjustment	Fourth (Peer-Parent-Teacher Oriented)	25	26.76	6.43	23.26	4.30	3.38***
Health Adjustment			25.04	4.89	25.47	18.47	0.12@
Submissiveness-Self assertion			26.28	6.48	23.24	3.82	3.18**
Emotionality			27.16	6.90	23.33	4.24	3.66***
Hostility-Friendliness		15,59	25.24	6.24	23.36	3.96	1.95@
Masculinity	M		26.08	2.93	36.12	7.68	8.03***
Femininity	F		10.66	2.88	29.13	7.11	6.91***

@ Not Significant

\*\* Significant at 0.01 level of significance

\*\*\* Significant at 0.001 level of significance

## *Chapter - 5*

# SUMMARY AND CONCLUSION

## **SUMMARY AND CONCLUSION**

Planning and implementation of intervention strategies to social isolates and, comparing self-perception and adjustment of sociometric stars, average chosen and social isolates before and after intervention is the main goal of the study.

### **5.1 SAMPLE**

The study was conducted in Nidadavole, a semiurban area in West Godavari district of Andhra Pradesh. The sample for the study was selected in three stages. The selection of four schools was done in the first stage. Then 16 classes from 7th, 8th, 9th and 10th standards were selected from these schools in the second stage. The selection of subjects for sociometric choice status from 16 classes was done in third stage. The total students included in 16 classes was 565. Among them 125 sociometric stars, 125 average chosen and 125 social isolates were identified and selected as sample for study.

### **5.2 TOOLS AND TECHNIQUES**

#### **5.2.1 The Test For Social Acceptability Among Peers (TSAAP)**

To identify sociometric stars, average chosen and social isolates The Test For Social Acceptability Among Peers (Chopra, 1983) was used. This test consisted of 4 questions in which each member of group was asked to name the members of the group with whom he/she would like to associate for different activities. On the basis of their responses, sociometric stars, average chosen and social isolates were identified.

### **5.2.2 Scales Measuring Self Perception (SMS)**

Level of self-perception was measured by using Scales Measuring self perception developed by Agrawal (1991). It had two sub-scales namely Self Regard Scale with 16 items and Self Acceptance Scale with 26 items. The sub-scales when combined measure self-perception.

### **5.2.3 Bell Adjustment Inventory Revised (1962) Student Form**

Adjustmental level was measured by using Bell Adjustment Inventory Revised (1962) Student Form developed by Bell(1962). The inventory provides six measures of personal and social adjustment. They are home adjustment (35 items), health adjustment (35 items), submissiveness- self assertion (35 items), emotionality (35 items), hostility - friendliness (30 items) and masculinity - femininity (30 items). The total number of items present in this inventory are 200.

## **5.3 INTERVENTION STRATEGIES**

Peer oriented, parent oriented and teacher oriented intervention strategies were designed for social isolates. Social isolates were divided into four groups. The first three groups of social isolates were exposed to peer, parent, teacher oriented intervention strategies. All the three strategies together were given to fourth group of social isolates. Intervention was given for a period of 8 weeks.

### **5.3.1    Peer-Oriented Intervention Strategy**

In this an effort was made to increase social interactions of social isolates with peers by discussing need and importance of having friends; by encouraging to share things and responsibilities with friends; by encouraging to share feelings and emotions with friends; by suggesting ways to improve personal appearance and to drop out bad habits and by activating social isolates to participate in indoor and outdoor activities.

### **5.3.2    Parent - Oriented Intervention Strategy**

In parent oriented strategy parents were given the following directions: to correct annoying mannerisms like bringing thumb, fingers, other objects in contact with mouth; to strengthen the traits which lead to popularity like encouraging good manners, sense of belongingness, to weaken the traits which lead to unpopularity like grabbing objects, destroying another's property, throwing objects at another person; to take children along with them to social gathering and making them to mingle with others freely; and to establish independence by developing habits of responsibility and by giving freedom in selection of friends, in spending money and in buying clothes or in doing shopping.

### **5.3.3    Teacher Oriented Intervention Strategy**

Teachers were asked to pay more attention to social isolate children, identify the skills and talents and provide opportunities to demonstrate them, to smile often and praise them for their achievements, and provide more opportunities to play and work with other children in group projects.

## **5.4 FINDINGS**

### **5.4.1 Self-Perception**

**5.4.1.1** In pre test sociometric stars secured very high and high levels of self perception, average chosen were in average level and social isolates were in low and very low levels of self-perception.

**5.4.1.2** In post test no changes were observed in mean scores of sociometric stars and average chosen as they were not given any intervention. After implementation of intervention strategies positive changes were seen in self-perception level of social isolates.

**5.4.1.3** In pre test the mean scores of social isolates on self acceptance, self regard and self-perception were significantly lesser than scores of sociometric stars and average chosen. Sociometric stars had better self acceptance, self regard and self-perception than average chosen. Average chosen secured lower mean score than sociometric stars and higher mean score than social isolates.

**5.4.1.4** In post test no significant differences were observed between social isolates and average chosen on self acceptance, self regard and self perception. However social isolates obtained significantly lower mean scores than sociometric stars.

**5.4.1.5** There were no significant differences between pre test and post test scores of sociometric stars, average chosen on self acceptance, self regard and self-perception. The differences between pre test and post test scores of social isolates on self acceptance, self regard and self-perception were significant at 0.001 level.

**5.4.1.6** There were significant differences between pre test and post test scores of peer oriented group of social isolates on self acceptance, self regard and self-perception at 0.001 level of significance.

**5.4.1.7** The mean scores of parent oriented group on self acceptance, self regard and self-perception in post test were higher than mean scores in pre test. The pre test and post test mean score differences were significant at 0.001 level.

**5.4.1.8** Teacher oriented group secured higher mean scores in post test than in pre test. Significant differences were observed between pre test and post test scores on self acceptance, self regard and self-perception at 0.001 level.

**5.4.1.9** Mean self acceptance, self regard and self-perception scores of fourth group of social isolates who received peer-parent-teacher oriented intervention strategy were improved significantly in post test as compared to pre test scores.

**5.4.1.10** Self-perception scores of social isolates who received peer-parent-teacher oriented intervention showed significantly higher improvement than social isolate groups who received peer, parent and teacher oriented intervention strategies. Next to this group social isolates who received teacher oriented intervention strategy showed greater improvement in self-perception than peer and parent oriented groups. However no significant difference was observed between peer and parent oriented groups in this regard.

**5.4.1.11** In pre test social isolates secured significantly lesser mean scores on self acceptance, self regard and self-perception than average chosen and sociometric stars. In post test after intervention social isolate groups did not differ significantly on self acceptance, self regard and self-perception with average chosen. The fourth group of social isolates who received peer-parent-teacher oriented strategy secured significantly higher scores than average chosen.

**5.4.1.12** After receiving intervention programmes all the four groups of social isolates obtained higher mean scores on self acceptance, self regard and self-perception in post test. Inspite of this improvement, the self acceptance, self regard and self-perception scores of social isolates were significantly lower than sociometric stars.

## **5.4.2 Adjustment**

**5.4.2.1** In pre test the home adjustment scores of all the sociometric stars were under the categories of excellent and good. Majority of the average chosen had good and average levels of home adjustment. Majority of social isolates had poor and average levels of home adjustment. In post test, no changes were observed in the levels of home adjustment of sociometric stars and average chosen. However after receiving the intervention programme there was a positive change in the levels of home adjustment of social isolates.

**5.4.2.2** In pre test sociometric stars had good level, average chosen had average level and social isolates had poor levels of health adjustment. In post test after receiving intervention programme there was a positive change in the health adjustment levels of social isolates.

**5.4.2.3** In pre test almost all the sociometric stars were in the category of very assertive and assertive. Majority of the average chosen had assertive and average levels on submissiveness-self assertion. In pre test most of the social isolates were submissive. In post test after intervention social isolates had assertive level and average levels of self assertion.

**5.4.2.4** In pre test almost all the sociometric stars were in the category of excellent and good levels in emotionality. Majority of the average chosen had good and average levels of emotionality. Majority of the social isolates had poor level of emotionality. Not much changes were seen in post test scores of sociometric stars and average chosen as they were not given any intervention. In post test after receiving intervention programmes, majority of social isolates had good and average levels of emotionality.

**5.4.2.5** In pre test majority of the sociometric stars obtained very friendly and friendly levels in hostility-friendliness measure. Majority of the average chosen had average level on hostility-friendliness. Most of the social isolates had average level and somewhat critical level. In post test no changes were observed among sociometric stars and average chosen as they were not given any intervention. However, after intervention in post test some of the social isolates reached very friendly and friendly levels on this measure.

**5.4.2.6** In pre test and post test among sociometric stars majority of the boys and girls were in strongly masculine level. Majority of the boys and girls among average chosen were in average level in this measure. In pre test majority of the boys and girls of social isolates were in feminine level. In post test after intervention among social isolates some boys and girls reached strongly masculine level and most of the boys were in masculine level.

**5.2.7** In pre test social isolates were inferior to average chosen and sociometric stars in home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity. In post test after implementation of intervention strategies, mean scores of social isolates on each area of adjustment were improved. After intervention even though improvement in all measures of adjustment were seen, social isolates were significantly lower in all adjustment measures than sociometric stars.

In post test social isolates showed better home adjustment than average chosen and the difference was significant at 0.05 level. In other measures like health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness, no significant differences were observed between social isolates and average chosen.

**5.4.2.8** No significant differences were found between pre test and post test scores of sociometric stars on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity. No significant differences were found between pre test and post test scores of average chosen on measures of adjustment except in hostility-friendliness. The differences between pre test and post test of social isolates were significant at 0.001 level on six measures of adjustment. In post test the mean scores of social isolates on each area of adjustment were improved.

**5.4.2.9** There were significant differences between pre test and post test scores of peer oriented group of social isolates on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness at 0.001 level. No significant difference was observed on masculinity-femininity measure.

**5.4.2.10** Significant differences were observed between pre test and post test scores of social isolates who received parent oriented intervention strategy on home adjustment, health adjustment, submissiveness - self assertion and emotionality at 0.001 level. However no significant difference was observed on hostility-friendliness and masculinity-femininity measures of adjustment.

**5.4.2.11** The lower means in post test scores of the teacher oriented group of social isolates on home adjustment, health adjustment, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity than pre test scores show significant improvement in adjustment measures after intervention.

**5.4.2.12** The mean scores of fourth group of social isolates who received peer-parent-teacher oriented intervention strategy showed significant difference between pre test and post test scores on all measures of adjustment except in masculinity-femininity.

**5.4.2.13** Adjustment scores of peer-parent-teacher oriented group of social isolates showed significantly higher improvement after intervention than social isolates who received peer, parent and teacher oriented intervention strategies. Compared to other intervention strategies the post test and pre test difference score was lower in social isolates who received teacher oriented intervention strategy on home, health, submissiveness-self assertion and emotionality. No significant difference was found between peer oriented and parent oriented groups of social isolates on home, health, submissiveness-self assertion, emotionality and masculinity-femininity measures of adjustment. Compared to other intervention strategies, the pre test and post test mean scores difference on hostility-friendliness was lower in social isolates who received parent oriented strategy. No significant differences were found between different social isolate groups on masculinity-femininity measure.

**5.4.2.14** In pre test average chosen showed significantly better adjustment than four groups of social isolates on home, health, submissiveness-self assertion, emotionality, hostility-friendliness and masculinity-femininity measures.

In post test after intervention also average chosen showed adjustment superiority compared to social isolates who received peer oriented intervention.

The second group of social isolates who received parent oriented intervention did not differ significantly with average chosen on health adjustment and submissiveness-self assertion measures.

The third group of social isolates who received teacher oriented intervention showed better adjustment in home area compared to average chosen. They did not differ significantly in post test on health, submissiveness-self assertion, emotionality, hostility-friendliness measures with average chosen. However average chosen had higher masculinity score than third group of social isolates.

The fourth group of social isolates who received peer-parent-teacher oriented intervention showed better adjustment than average chosen on home, health, submissiveness-self assertion, emotionality and hostility-friendliness measures.

**5.4.2.15** In pre test sociometric stars showed significantly higher adjustments in all measures of adjustment. In post test also after intervention sociometric stars were significantly superior than all the four groups of social isolates in all measures of adjustment. Only on two areas health adjustment and hostility-friendliness measures the fourth group of social isolates who received peer-parent-teacher oriented intervention did not differ significantly with sociometric stars.

## **5.5 CONCLUSION**

In post test after intervention social isolates obtained significantly higher scores on self acceptance, self regard and self-perception than pre test. This significant improvement was seen in all the four groups of social isolates after intervention.

Compared to average chosen and sociometric stars, social isolates obtained significantly lower scores on self acceptance, self regard and self-perception in pre test. In post test after intervention social isolates obtained significantly higher scores on self acceptance, self regard and self perception than average chosen. However inspite of the improvement in the self acceptance, self regard and self-perception scores of social isolates in post test they were significantly lower than sociometric stars.

In all the measures of adjustment, social isolates showed significant improvement in post test compared to pre test. In pre test social isolates showed significantly lower adjustment than average chosen and sociometric stars. In post test the social isolates showed significantly better adjustment than average chosen on home area. No significant differences were observed in post test between social isolates and average chosen on health, submissiveness-self assertion, emotionality and hostility-friendliness measures of adjustment. However average chosen had higher score on masculinity-femininity measure compared to social isolates. Sociometric stars maintained their adjustment superiority in post test also. In post test after implementation of intervention strategies, social isolates showed improvement in each area of adjustment. Inspite of this improvement in post test social isolates were significantly lower in all adjustment measures than sociometric stars.

It was also evident from the present research, after intervention, fourth group of social isolates who received peer-parent-teacher oriented intervention strategy showed significantly higher self-perception and adjustment than peer oriented, parent oriented and teacher oriented groups of social isolates.

Teacher oriented group secured greater mean self-perception scores than parent and peer oriented groups. No significant difference was observed between peer and parent oriented groups of social isolates on self perception.

Compared to other intervention strategies the post test and pre test difference score was lower in social isolates who received teacher oriented intervention strategy on home, health, submissiveness-self assertion and emotionality measures. No significant difference was found between peer oriented and parent oriented groups of social isolates on home, health, submissiveness-self assertion, emotionality and masculinity-femininity measures of adjustment. Compared to other intervention strategies, the pre test and post test mean scores difference on hostility-friendliness was lower in social isolates who received parent oriented strategy. No significant differences were found between different social isolate groups on masculinity femininity measure.

## **5.6 IMPLICATIONS OF THE PRESENT RESEARCH**

As such, no person is born social isolate. It is only in the journey through life, especially in the crucial age period of adolescence they may develop some social problems among them. Many children who are socially isolated may not fit into normal situations. They become a problem to themselves as well as to the home, school and the community. Positive guidance and help in teaching children in developing socially desirable traits will go far to produce very different but adequate and happy children.

Based on the findings following recommendations were made.

### **5.6.1 Guidelines to parents**

Parents should follow the following guidelines for the development of their childrens' better social interactions. Parents should

- make their children to share things and responsibilities with their friends and not to hesitate to take assistance from their friends when in need.
- correct annoying mannerisms that create an unfavourable impression like bringing thumb, fingers, pencils or other objects in contact with mouth.
- make their children aware of what they are doing or saying to annoy others and help them correct their behaviour.
- encourage their children to mingle with others freely and should take their children along with them to social gatherings.
- give freedom to their children to express their needs, desires, opinions and their positive and negative feelings.

### **5.6.2 Guidelines to Teachers**

Teachers should

- pay more attention to social isolate children when the desired behaviour occurs and ignore disruptive behaviour.
- identify the skills and talents of social isolates and provide opportunities to demonstrate them.

give more chances to social isolates to participate in class and more time to answer. If they fail to answer a question, teachers should ask the question again, by giving clues and pressing the student to try again.

smile more often and praise social isolates for their achievements.

provide more opportunities to play and work with other children in group projects.

give some exercises for social isolates to increase their concentration and also to remember new words in the lesson.

implement peer pairing procedure to improve the development of social isolates. In this sociometric star should be paired with social isolate from the same class. Whatever activity sociometric stars will do in the class, social isolates also will do the same activity.

tell the need and importance of friendship and should explain what makes children acceptable to their peers. Teachers should provide opportunities for social isolates to share feelings and emotions with friends. This can be achieved through sharing past and present experiences.

### **5.6.3 Parent-Teacher Association**

The child depends upon his parents and teachers to help him make better adjustments to the environment. If the parents and teachers are to plan their responsibilities they need to know each other, work and plan together in the child's interest.

But in India, many parents visit the school only at the time of admission of the child and they never visit it again. Therefore teacher should take initiative and make home visits and have parents feel that the teachers are interested in the child, like him and wish the aid of the parents in helping the child. Only when teachers built a good will and rapport among parents through frequent contacts, then only they can hold regular conferences. One thing that the teachers should remember is that mere giving of advice is not enough. Parents should be made active participants.

Many Indian parents think that play is purposeless activity for their children. They don't know the importance of both indoor and outdoor play activities. So teachers should explain to parents the importance of play.

#### **5.6.4 Strengthening Teacher Training Programme**

It is desirable to include basic aspects of social acceptance in the teacher training programme, because the teachers are not well equipped to deal with social isolates. Periodical workshops and seminars should be organized for teachers to make the social isolates aware of development in social acceptance. The National and State Level Educational Institutions like National Council of Educational Research and Training (NCERT) and State Council of Educational Research and Training (SCERT) should take the lead and modify the existing teacher training programmes.

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# **ANNEXURES**

## **ANNEXURE - i**

### **THE TEST FOR SOCIAL ACCEPTABILITY AMONG PEERS**

Name : Class :

Father's Name : Section :

Name of the School :

#### **Instructions**

*Before you answer please read the following instructions*

1. This is not an examination of any type or related for your study.
2. For answering the given questions on the other side you please write your classmate's name of your choice.
3. You can name any of your classmates and they should be from your class and section even though, he/she is absent today.
4. If you want you can write any one of your classmate for more activities.
5. You write two of your classmates' names.
6. You write your classmate's name as per your liking without any hesitation. Those details will be confidential.

1. If seating arrangement is more according to your wish, with which classmate you want to sit ?

Mostly :

Little lesser :

2. If you want to work with your classmates, whom will you prefer to work with ?

Mostly :

Little lesser :

3. In your class with whom would you like to play ?

Mostly :

Little lesser :

4. With whom would you like to spend in lunch break, interval time ?

Mostly :

Little lesser :

## Annexure-ii

# THE TEST FOR SOCIAL ACCEPTABILITY AMONG PEERS (Telugu Version)

పేరు : తరగతి :

తండ్రి పేరు : సెకన్డ్ : .

సారశాల పేరు :

సూచనలు :

క్రింది ప్రశ్నలను పూరించే ముందు ఈ క్రింది వివరాలు చూడండి.

1. ఇది ఎటువంటి పరీజా కాదు. మీ చదువుకి సంబంధించింది కాదు.
2. వెనుక ఉన్న ప్రశ్నలను పూరించుటకు మీరు మీతోటి విద్యార్థులలో ఎవరిని ఎంచుకున్నారో వారి పేరు ఎదా విధిగా ఖాయండి.
3. ఎవరి పేరు ఖాయదలచుకున్నారో వారు ఈ సెకన్డ్లోను, ఈ తరగతిలోను వుండాలి.
4. ఒకవేళమీరు ఇష్టపడిత మీతోటి విద్యార్థి పేరును ఎక్కువ కార్యాలకు కూడా ఉపయోగించవచ్చు.
5. ప్రత్యేక కార్యక్రమం గురించి మీరు మీ తోటి విద్యార్థులలో ఇద్దరి పేర్లు ఖాయండి.
6. మీరు ఎటువంటి సంకోచం లేకుండ మీ తోటి విద్యార్థి పేరు ఖాయండి. ఆ వివరాలు రహస్యంగా ఉంచబడతాయి

1. ఒకవేళమీరు మీ తరగతిలో కూర్చోవడం మీ ఇష్టానుసారమయిత మీరు మీ తరగతి వారిలో ఎవరి దగ్గర కూర్చోవడానికి ఇష్టపడతారు.

అధికంగా

కొండెము తక్కువగా

2. ఒకవేళ మీరు మీ తోటి విద్యార్థులతో కలసి పని చేయాలనుకుంటే ఎవరితో కలసి చేయాలని అనుకుంటారు?

అధికంగా

కొండెము తక్కువగా

3. మీతోటి విద్యార్థులలో ఎవరితో ఆడుకోవడానికి మీరు ఇష్టపడతారు?

అధికంగా

కొండెము తక్కువగా

4. వికాంతి సమయంలో మీరు ఎవరితో ఉండడానికి ఇష్టపడతారు?

అధికంగా

కొండెము తక్కువగా

## **ANNEXURE - iii**

## **SCALES MEASURING SELF PERCEPTION (SMSP)**

## SCORING TABLE

	Sa	Sr	Sp (Total)
Raw Score percentile			
Interpretation			

*Please give the details below :*

Name \_\_\_\_\_

Sex (Male/Female) : \_\_\_\_\_ Class : \_\_\_\_\_

Address :

**Instructions :** There are two answers for every question. Choose the suitable answer and put a tick mark (✓) on correct answer. Answer all the 40 questions.

1. A. Always I want to speak [ ]  
truth is my firm decision a. Sometimes I would n't tell [ ]  
truth
  2. A. I want to do any work in [ ]  
the right way always is my  
firm decision a. Doing work in the right [ ]  
way is not at all my firm  
decision
  3. A. I am afraid of loneliness [ ] a. I am not afraid of [ ]  
loneliness
  4. A. I feel sorry when I am [ ] a. I will not feel sorry when I [ ]  
selfish am selfish
  5. A. I am confident upon myself [ ]  
that I can do everything a. Inspite of confidence I have [ ]  
some basic limitations
  6. A. I don't like any one praising [ ]  
me anytime a. I will get liking for praises [ ]
  7. A. I have knowledge about my [ ]  
weakness a. I cann't find out my [ ]  
weakness.
  8. A. I feel angry whenever my [ ]  
health is not well a. I don't feel angry even [ ]  
when my health is not well

9. A. I am afraid of committing [ ] mistakes

a. I am not afraid of [ ] committing mistakes.

10. A. In the matter of self [ ] confidence my view depends upon my achievement

a. In the matter of self [ ] confidence my view doesn't depend upon my achievement.

11. A. I am afraid of failure [ ]

a. I am not afraid of failure [ ]

12. A. I can live in the way I like [ ]

a. I can't live in the way I like [ ]

13. A. I can face ups and downs in [ ] my life

a. I can't face ups and downs [ ] in my life

14. A. Whichever moral values I [ ] have learnt, I have left many values out of them

a. I have not left any moral [ ] values which I have learnt

15. A. I live in the limit of my [ ] necessary likes and dislikes and morality

a. I don't live in the limit of [ ] my necessary likes and dislikes and morality

16. A. I have confidence upon my [ ] capacity to face any situation

a. I have no confidence in [ ] facing any negative situation.

17. A. I know that I have capacity [ ] to fight with life.

a. I know that I don't have [ ] capacity to fight with life

18. A. I think before doing any [ ] work for my sake

a. I don't think before doing [ ] anything that it is good or not.

19. A. I am worried of the fear [ ] that I am inefficient

a. I am not worried about the [ ] fear that I am inefficient

20. A. Sometimes I have to give [ ] explanation for the things I have done earlier

a. There is no need for me to [ ] give explanation for the things which I have done earlier

21. A. Whenever I think of myself, [ ] my self-respect gets interrupted

a. whenever I think of myself, [ ] my self-respect wouldn't get interrupted.

22. A. I feel great when others [ ] accept my words

a. It is not necessary that [ ] others should accept my words

23. A. I like thinking because it [ ] increases mental maturity

a. I don't like thinking [ ]

24. A. I never do gossip

a. Sometimes I do gossip

25. A. I don't doubt in telling my [ ] drawbacks in front of my friends.
26. A. I am ready to endure [ ] anything leading a lonely life
27. A. I doubt to show fault in [ ] others
28. A. My aim is to achieve a [ ] higher position in the society and I work for it.
29. A. I recognize my inner faults [ ] in myself
30. A. I want to be sincere but I [ ] can't succeed
31. A. It is natural to be selfish [ ]
32. A. People should feel sorry for [ ] their faults
33. A. When I love myself, then [ ] only others will love me.
34. A. I have prestige. [ ]
35. A. I think of my bad manners [ ]
36. A. I have self stabilization [ ]
37. A. I am assured of my [ ] relationships with others.
38. A. I accept my mistakes [ ]
39. A. Even if any major work has [ ] not completed, I feel satisfied with what I have done
40. A. Until I have self confidence [ ] I can be far from any difficulty
- a. I don't speak about my [ ] weakness with friends
- a. I feel afraid to be isolated [ ] and experiences of the result of being isolated.
- a. I wouldn't doubt in [ ] showing fault in others
- a. I come up in my life I [ ] remain in my limits only
- a. I don't recognize my faults [ ]
- a. I want to be sincere and I [ ] always will be
- a. It is unnatural to be [ ] selfish.
- a. People should not feel sorry [ ] for their faults.
- a. Even if I love myself others [ ] will not love me
- a. I don't have prestige [ ]
- a. I don't think of my bad [ ] manners
- a. I don't have self [ ] stabilization
- a. I am not assured of my [ ] relationships with others.
- a. I can't accept my [ ] mistakes
- a. Even if any major work has [ ] not completed, I will not feel satisfied with what I have done.
- a. Even though I have self- [ ] confidence I can't be far from difficulties.

**ANNEXURE - iv**  
**SCORING KEY**

**SCALES MEASURING SELF-PERCEPTION**

<b>Self Acceptance (SA)</b>	<b>Self Regard (SR)</b>
<b>Item No.</b>	<b>Item No.</b>
1b	11b
2b	12a
3b	13a
4b	14a
5a	15a
6a	16a
7a	17a
8a	18a
9b	21a
10a	22a
11a	23a
16a	28a
19b	30b
20b	31a
24b	33a
25a	35a
26a	
27b	
29a	
32a	
34b	
36b	
37b	
38a	
39a	
40b	

**Annexure- V**  
**SCALES MEASURING SELF PERCEPTION (SMSP)**  
(Telugu Version)

దయచేసి ఈ క్రింది వివరాలు ఇవ్వండి.

పేరు : .....

ఆడ / మగ : ..... తరగతి :

అడ్షను : .....

సూచన : ఈ క్రింది ప్రశ్నలకు రెండు సమాధానాలు ఉన్నవి. సరైన సమాధానానికి '✓' మార్కు చేయండి. అన్ని 40 ప్రశ్నలకు సమాధానాలు వ్రాయవలెను.

1. అ) ఎల్లప్పుడు నేను నిజమే చెప్పాలని ( )      ఆ) అప్పుడ్లప్పుడు నేను నిజము చెప్పను. ( )  
నా గట్టి నీర్చయము
  
2. అ) ఏ పని చేసినా నేను ఉత్తమమైన ( )      ఆ) ఏ పనిచేసినా ఉత్తమమైన పద్ధతిలో ( )  
పద్ధతిలో చేయాలనినా గ్రూప్పించుము.  
చేయాలనేది నా గట్టి నీర్చయము అస్తులు  
కానే కాదు.
  
3. అ) నాకు ఒంటరికనం అంటే భయం ( )      ఆ) నాకు ఒంటరికనం అంటే భయం ( )  
వేస్తుంది.  
వేయదు.
  
4. అ) నాకు స్వాధంగా ఉన్నప్పుడు ( )      ఆ) నాకు స్వాధంగా ఉన్నప్పుడు ఎటువంటి ( )  
పశ్చాత్తాపం కలుగుతుంది.  
పశ్చాత్తాపం కలుగదు.
  
5. అ) ఏమైనా చెయ్యగలనని నాకు నా ( )      ఆ) నాకు నామీద నమ్మకం ఉన్న కాని ( )  
మీద పూర్తి నమ్మకం ఉంది.  
ప్రొఫెషనల్ కౌన్సిల్ లో పాలున్నాయి.
  
6. అ) ఎవ్వొనా ఎప్పుడైనా నన్న పొరిడిలే ( )      ఆ) నాకు పొగడ్తలవలన ఇష్టము ( )  
నాకు ఇష్టముండదు.  
కల్పుతుంది.
  
7. అ) నేను నాలోని బలహీనతలను ( )      ఆ) నేను నాలోని బలహీనతలను ( )  
గుర్తిస్తాను.  
గుర్తించసు.
  
8. అ) ఎప్పుడైతే నా ఆరోగ్యం బాగుండ ( )      ఆ) నా ఆరోగ్యం బాగుండకపోయినా ( )  
దీ అప్పుడు నాకు కోపం వస్తుంది.  
నాకు కోపం రాదు.

9. అ) నేను తప్పులు చేయడానికి భయ ( ) ఆ) నేనము తప్పులు చేయడానికి భయ ( ) పడతాను. పడను.

10. అ) నేను, నాకు లభించిన వాటి మీదే ( ) ఆ) నేను, నాకు లభించిన వాటి మీదే ( ) ఆధారపడి ఉండాలనే నిర్దయం ఆధారపడి ఉండాలనే నిర్దయముతో తో ఆత్మాభిమానముగా ఉండాను. ఆత్మాభిమానంగా ఉండను.

11. అ) నాకు ఓటమి అంటే భయం ( ) ఆ) నాకు ఓటమి అటే భయం లేదు ( )

12. అ) నాకు ఇష్టమైన రీతిలో నేను ( ) ఆ) నాకు ఇష్టమైన రీతిలో నేను జీవించ ( ) జీవించగలను. లేను.

13. అ) జీవితంలో నేను ఎత్తు పల్లాలను ( ) ఆ) జీవితంలో నేను ఎత్తు పల్లాలను ( ) ఎదుర్కొనగలను. ఎదుర్కొనలేను.

14. అ) నేను నేర్చుకున్న సైతిక ( ) ఆ) నేను నేర్చుకున్న సైతిక విలువలను ( ) విలువలలో చాలా వాటిని వదిలేయలేదు.

15. అ) నా అవసరాలు, ఇష్టా అయిష్టాలు ( ) ఆ) నా అవసరాలు, ఇష్టా అయిష్టాలు ( ) సైతిక విలువలకు తగినట్లుగా ఉండవు. ఉంటాను.

16. అ) ఎలాంటి పరిష్కారులనైనా ( ) ఆ) ఎలాంటి పరిష్కారులనైనా ఎదుర్కొనే ( ) ఎదుర్కొనే శక్తి నాలో ఉన్నదని శక్తి నాలో ఉన్నదనే విశ్వాసం నాకు నాకు విశ్వాసం వుంది. లేదు.

17. అ) జీవితంతో పోరాడగలిగే శక్తి నాకు ( ) ఆ) జీవితంతో పోరాడగలిగే శక్తి నాకు ( ) ఉండని తెలుసు.

18. అ) నా మంచికోసం నేను చేసి ( ) ఆ) నేను చేసే పనులు సరైనవో కావో ( ) పనులు సరైనవో కావో అలోచించను. ఆలోచిస్తాను.

19. అ) నేను అసమర్థడననే భయంతో ( ) ఆ) నేను అసమర్థడననే భయంతో దిగులు ( )  
దిగులు పడుతున్నాను. పడటం లేదు.
20. అ) నేను పూర్వం చేసిన పనుల ( ) ఆ) నేను పూర్వం చేసిన పనుల గురించి ( )  
గురించి అప్పుడప్పుడు సంజా సంజాయేఁ ఇవ్వనవసరం లేదు.  
యేఁ ఇవ్వవలసి వుంది.
21. అ) నా గురించి నేను ఆలోచించు ( ) ఆ) నా గురించి నేను ఆలోచించుకుంటూ ( )  
కుంటూ ఉంటే నా ఆత్మగౌరవానికి ఉంటే నా ఆత్మగౌరవానికి భంగం  
భంగం కలుగుతుంది. కలుగదు.
22. అ) ఇతరులు నా మాట ఒప్పుకోవడం ( ) ఆ) ఇతరులు నామాట ఒప్పుకోవడం ( )  
నాకు చాలా గొప్పగా ఉంటుంది. తప్పనిసరి కాదు
23. అ) నాకు ఆలోచించడం ఇష్టం ఎందు ( ) ఆ) నాకు ఆలోచించడం ఇష్టముండదు. ( )  
కంటే మానసిక వికాసం పెరుగు  
తుంది.
24. అ) నేను ఎప్పుడూ పిచ్చాపాటి మాట్లా ( ) ఆ) నేను అప్పుడప్పుడూ పిచ్చాపాటి ( )  
డను. మాట్లాదుతూ ఉంటాను.
25. అ) మిత్రుల ఎదుట నా లోపాలుచెప్పు ( ) ఆ) మిత్రుల ఎదుట నా లోపాలను ( )  
కోవటానికి నాకు ఎటువంటి చెప్పను.  
సంకోచము లేదు.
26. అ) నేను ఒంటరిగా జీవిస్తూ ఏదైనా ( ) ఆ) ఒంటరిగా జీవించటం మరియు దాని ( )  
భరించటానికి సిద్ధంగా ఉన్నాను. పరిణామాలను అనుభవించటం నాకు  
భయం
27. అ) ఇతరుల లోపాలను ఎత్తిచూపటా ( ) ఆ) ఇతరుల లోపాలను ఎత్తి చూపటానికి ( )  
నికి నేను సంకోచిస్తాను. నేను సంకోచించను.
28. అ) నేను సహజంలో బాగా ప్రైకి ( ) ఆ) వృద్ధిలోకి రావటానికి నేను నా ( )  
పెళ్ళటమే ధ్వయంగా పెట్టుకుని  
దాని గురించి ప్రయత్నిస్తాను. హద్దులలోనే ఉంటాను.

29. అ) నేను నా లోని లోపాలను ( ) ఆ) నేను నాలోని లోపాలను ( ) గుర్తిస్తాను.

30. అ) నేను నిజాయితీగా ఉండాలని ( ) ఆ) నేను నిజాయితీగా ఉండాలని ( ) ఆశిస్తాను కాని సఫలం కాలేను. ఆశిస్తాను మరియు నిజాయితీగా ఉంటాను.

31. అ) స్వాధంగా ఉండటం సహజమే. ( ) ఆ) స్వాధంగా ఉండటం సహజ మైనది కాదు.

32. అ) ప్రజలు తమ తప్పుల గురించి ( ) ఆ) ప్రజలు తమ తప్పుల గురించి ( ) పశ్చాత్తాప పడవలేను. పశ్చాత్తాప పడనవసరము లేదు.

33. అ) ఎప్పుడు నన్న నేను ప్రేమించు ( ) ఆ) నన్న నేను ప్రేమించుకున్నప్పటికి ( ) కుంటానో అప్పుడు ఇతరులు నన్న ఇతరులు నన్న ప్రేమించరు.  
ప్రేమిస్తారు.

34. అ) నాకు పలుకుబడి ఉంది. ( ) ఆ) నాకు పలుకుబడి లేదు. ( )

35. అ) నాలోని చెడుగుణాల గురించి ( ) ఆ) నాలోని చెడు గుణాల గురించి ( ) ఆలోచిస్తాను. ఆలోచించను.

36. అ) నాకు ఆత్మనిబ్భరం ఉంది. ( ) ఆ) నాకు ఆత్మనిబ్భరం లేదు. ( )

37. అ) ఇతరులతో నేను పరిచయాలు ( ) ఆ) ఇతరులతో నేను పరిచయం పెట్టు కోవాలనే ఆస్క్రిటో ఉంటాను. ( )

38. అ) నేను నా తప్పులను ( ) ఆ) నేను నా తప్పులను బప్పుకోను. ( ) బప్పుకుంటాను.

39. అ) నేను అనుకున్న పెద్ద పని ( ) ఆ) నేను అనుకున్న పెద్దపని జరగక జరగకపోయినా ఉన్న దానితో ( ) పోయినప్పుడు నేను అసంతృప్తి సంతృప్తిగా ఉంటాను. పడతాను.

40. అ) నాకు ఆత్మవిశ్వాసం ఉన్నంత ( ) ఆ) నాకు ఆత్మవిశ్వాసం ఉన్నప్పటికే వరకు ఎలాంటి బాధనైనా దూరం నేను బాధలను దూరం చేసుకోలేను. ( )

## ANNEXURE - vi

### THE ADJUSTMENT INVENTORY

#### DIRECTIONS

Are you interested in knowing more about your own personality? If you will ANSWER HONESTLY and THOUGHTFULLY all of the questions on the pages that follow, it may be possible for you to obtain a better understanding of yourself. There are no right or wrong answers. Indicate your answer to each question by making a mark in the appropriate space given for "YES", "NO", or "?". Use the question mark only when you are certain you cannot answer "YES" or "NO". DO NOT MAKE ANY MARKS ON THE TEST BOOKLET. There is no time limit for these questions, but work rapidly.

If you have NOT been living with your parents, answer certain of the questions with regard to the people with whom you have been living.

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1d	Do you daydream frequently	Yes	?	No
2b	Do you take cold rather easily from other people?	Yes	?	No
3f	Do you like dramatics very much?	Yes	?	No
4e	Do you think that the conversation of many people is pretty trite and silly?	Yes	?	No
5d	Does it frighten you when you have to see a doctor about some illness?	Yes	?	No
6c	At a reception or tea do you seek to meet the important person present?	Yes	?	No
7b	Are your eyes very sensitive to light?	Yes	?	No
8a	Did you ever have a strong desire to run away from home?	Yes	?	No
9f	Do colours greatly interest you?	Yes	?	No
10e	Do you think it will ever be possible for all the people of the earth to live together peacefully?	Yes	?	No
11c	Do you take responsibility for introducing people at a party?	Yes	?	No
12a	Do you sometimes feel that your parents are disappointed in you?	Yes	?	No

13d	Do you frequently have spells of the "blues"?	Yes	?	No
14b	Are you subject to hay fever or asthma?	Yes	?	No
15e	Have you found that there are many persons in this world whom you just can't afford to trust?	Yes	?	No
16f	Do you like to wear colourful clothes?	Yes	?	No
17c	Do you often have much difficulty in thinking of an appropriate remark to make in group conversation?	Yes	?	No
18b	Have you ever had scarlet fever or diphtheria?	Yes	?	No
19f	Do you prefer a shower bath to a tub bath?	Yes	?	No
20e	Do you think that it is pretty good plan to "cover up" a bit rather than to put yourself in an embarrassing position by telling the whole truth?	Yes	?	No
21c	Did you ever take the lead to enliven a dull party?	Yes	?	No
22a	Does your mother tend to dominate your home?	Yes	?	No
23f	Would you like to be a social worker?	Yes	?	No
24c	Do you enjoy social gatherings just to be with people?	Yes	?	No
25e	Have a number of people acted unfriendly toward you?	Yes	?	No
26a	Has either of your parents frequently criticized you unjustly?	Yes	?	No
27c	Do you feel embarrassed when you have to enter a public assembly after everyone else has been seated?	Yes	?	No
28d	Do you often feel lonesome, even when you are with people?	Yes	?	No
29f	Would you like to be an interior decorator?	Yes	?	No
30b	Have you ever been seriously injured in any kind of an accident?	Yes	?	No
31a	Do you feel that there has been a lack of real affection and love in your home?	Yes	?	No
32c	In school is it difficult for you to give an oral report before the class?	Yes	?	No
33b	Do you have many headaches?	Yes	?	No
34e	Have you ever felt that someone was trying to do you harm?	Yes	?	No
35f	Would you like to be a private secretary?	Yes	?	No
36e	Do you often feel that people do not understand you?	Yes	?	No
37a	Have your relationships with your father usually been pleasant?	Yes	?	No
38b	Do you sometimes have difficulty in getting to sleep even when there are no noises to disturb you?	Yes	?	No
39c	When riding on a train or a bus do you sometimes engage fellow travellers in conversation?	Yes	?	No
40b	Do you frequently feel very tired toward the end of the day?	Yes	?	
41d	Does the thought of an earthquake or a fire frighten you?	Yes	?	
42e	Do you believe in being "brutally frank" most of the time?	Yes	?	No

43f	Do you often use the word "cute" in describing people or things?	Yes	?	No
44f	Does the thought of having burglars in your house at night frighten you?	Yes	?	No
45b	Have you lost weight recently?	Yes	?	No
46a	Has either of your parents insisted on your obeying him or her regardless of whether or not the request was reasonable?	Yes	?	No
47c	Do you find it easy to ask others for help?	Yes	?	No
48f	Do you often read such magazines as Good Housekeeping and Ladies' Home Journal?	Yes	?	No
49a	Has illness or death among your immediate family tended to make home life unhappy for you?	Yes	?	No
50b	Do you frequently have spells of dizziness?	Yes	?	No
51e	Have people ever accused you of being too critical of them?	Yes	?	No
52a	Has lack of money tended to make home unhappy for you?	Yes	?	No
53d	Are you easily moved to tears?	Yes	?	No
54c	Are you troubled with shyness?	Yes	?	No
55f	Does a big fire scare you?	Yes	?	No
56e	When you want something from a person with whom you are not very well acquainted, would you rather write a note or letter to the individual than go and ask him or her personally?	Yes	?	No
57a	Has either of your parents frequently found fault with your conduct?	Yes	?	No
58b	Have you ever had a surgical operation?	Yes	?	No
59c	Would you feel very self-conscious if you had to volunteer an idea to start a discussion among a group of people?	Yes	?	No
60d	Do you dread the sight of a snake?	Yes	?	No
61e	Do you sometimes feel that there are an "awful lot of saps" in this world?	Yes	?	No
62f	Are you afraid of insane persons?	Yes	?	No
63a	Have your parents frequently objected to the kind of companions that you go around with?	Yes	?	No
64d	Do things often go wrong for you from no fault of your own?	Yes	?	No
65b	Do you have many colds?	Yes	?	No
66c	Have you had experience in making plans for and directing the actions of other people?	Yes	?	No
67a	Have you been embarrassed because of the type of work your father does in order to support the family?	Yes	?	No
68e	Have you frequently had the experience of having a friend "double-cross" you?	Yes	?	No
69f	Do you usually read the sport section of your news paper?	Yes	?	No

70b	Are you subject to tonsilitis or laryngitis?	Yes	No	
71d	Are you frightened by lighting?	Yes	No	
72a	Is either of your parents very easily irritated?	Yes	No	
73b	Are you subject to attacks of influenza?	Yes	No	
74d	Have you frequently been depressed because of low marks in school?	Yes	No	
75c	Do you have difficulty in starting conversation with a person to whom you have just been introduced?	Yes	No	
76e	Do you think that you can usually trust women to "play fair" with you?	Yes	No	
77f	Does it disgust you to hear someone use foul language?	Yes	No	
78d	Have you ever felt that someone was hypnotizing you and making you act against your will?	Yes	No	
79b	Have you had considerable illness during the last ten years?	Yes	No	
80a	Have you frequently disagreed with either of your parents about the way in which the work about the home should be done?	Yes	No	
81d	Do you sometimes envy the happiness that others seem to enjoy?	Yes	No	
82c	Have you frequently known the answer to a question in class but failed when called upon because you were afraid to speak out before the class?	Yes	No	
83b	Do you frequently suffer discomfort from gas in the stomach or intestines?	Yes	No	
84e	Does the extremely naive and gullible person irritate you a good bit?	Yes	No	
85f	Do you dislike the words "belly" and "guts"?	Yes	No	
86d	Have you ever been afraid that you might jump off when you were on a high place?	Yes	No	
87a	Have there been frequent family quarrels among your near relatives?	Yes	?	No
88c	Do you find it easy to make friendly contacts with members of the opposite sex?	Yes	?	No
89d	Do you get discouraged easily?	Yes	?	No
90a	Have you frequently quarreled with your brothers or sisters?	Yes	?	No
91e	Have you met a number of people whom you disliked rather intensely?	Yes	No	
92f	Does it disgust you to see someone spitting tobacco juice?	Yes	No	

93a	Have the actions of either of your parents aroused a feeling of fear in you at times?	Yes	?	No
94d	Are you often sorry for the things you do?	Yes	?	No
95c	If you were a guest at an important dinner would you do without something rather than ask to have it passed to you?	Yes	?	No
96a	Do you think your parents fail to recognize that you are a mature person and hence treat you as if you were still a child?	Yes	?	No
97b	Are you subject to eyestrain?	Yes	?	No
98e	Do you think that the majority of people would be crooked if it weren't for their fear of being caught and punished?	Yes	?	No
99f	Does the strong odor of perspiration disgust you?	Yes	?	No
100d	Are you bothered by the feeling that people are reading your thoughts?	Yes	?	No
101c	Have you had a number of experiences in appearing before public gatherings?	Yes	?	No
102b	Do you often feel fatigued when you get up in the morning?	Yes	?	No
103a	Do you feel that your parents have been unusually strict with you?	Yes	?	No
104d	Do you get angry easily?	Yes	?	No
105b	Has it been necessary for you to have frequent medical attention?	Yes	?	No
106e	Do you often call attention to "dumb remarks" made by some of your associates?	Yes	?	No
107f	Does a drunken man disgust you?	Yes	?	No
108c	Do you find it very difficult to speak in public?	Yes	?	No
109d	Do you often feel just miserable?	Yes	?	No
110a	Has either of your parents certain personal habits which irritate you?	Yes	?	No
111a	Was your home always supplied with the common necessities of life?	Yes	?	No
112e	Do you think that most people will take advantage of you if they get a chance?	Yes	?	No
113f	Do you like to read about new styles in clothing?	Yes	?	No

114d	Are you troubled with feelings of inferiority?	Yes	?	No
115b	Do you feel tired most of the time?	Yes	?	No
116f	Do you like to spend considerable time caring for your hands and your complexion?	Yes	?	No
117e	Do you think it is true that the only way to get ahead in life is to look out for yourself first?	Yes	?	No
118d	Do you consider yourself rather a nervous person?	Yes	?	No
119c	Do you enjoy social dancing a great deal?	Yes	?	No
120d	Do you often feel self-conscious because of your personal appearance?	Yes	?	No
121a	Do you love your mother more than your father?	Yes	?	No
122b	Are you subject to attacks of indigestion?	Yes	?	No
123f	Do you enjoy arranging flowers?	Yes	?	No
124c	Have you ever felt that people were talking about you "behind your back"?	Yes	?	No
125e	Do you think that a lot of our social customs and moral practices are "pretty dumb"?	Yes	?	No
126d	Do you blush easily?	Yes	?	No
127a	Have you frequently had to keep quiet or leave the house in order to have peace at home?	Yes	?	No
128c	Do you feel very self-conscious in the presence of people whom you greatly admire, but with whom you are not well acquainted?	Yes	?	No
129b	Do you sometimes have shooting pains in the head?	Yes	?	No
130f	Do you enjoy dancing with a member of your own sex?	Yes	?	No
131d	Are you ever bothered by the feeling that things are not real?	Yes	?	No
132b	Do you frequently experience nausea or vomiting or diarrhea?	Yes	?	No
133c	Are you sometimes the leader at a social affair?	Yes	?	No
134d	Are your feelings easily hurt?	Yes	?	No
135e	Do you find that many of the people you meet are very unreasonable?	Yes	?	No

136f	Do you like to wear jewelery?	Yes	?	No
137e	Do you ever cross the street to avoid meeting somebody?	Yes	?	No
138a	Do you occasionally have conflicting moods of love and hate for members of your family?	Yes	?	No
139a	Was your father what you would consider your ideal of manhood?	Yes	?	No
140c	Do you think it is a good idea to point out other people's faults to them?	Yes	?	No
141c	If you come late to a meeting, would you rather stand or leave than take a front seat?	Yes	?	No
142b	Were you ill much of the time during childhood?	Yes	?	No
143d	Do you worry over possible misfortunes?	Yes	?	No
144c	Do you make friends readily?	Yes	?	No
145f	Do you like to read about the construction of airplanes and battleships?	Yes	?	No
146a	Did your parents frequently punish you when you were between 10 and 15 years of age?	Yes	?	No
147e	Have you had the experience of being "chiseled" out of something by a supposed friend?	Yes	?	No
148b	Do you frequently have difficulty in breathing through your nose?	Yes	?	No
149c	Are you often the centre of favourable attention at a party?	Yes	?	No
150a	Does either of your parents become angry easily?	Yes	?	No
151c	Do you find that you tend to have a few very close friends rather than many casual acquaintances?	Yes	?	No
152d	Are you troubled with the idea that people are watching you on the street?	Yes	?	No
153f	Do you like to do handicraft work such as knitting, sewing or crocheting?	Yes	?	No
154f	Do you think it is wrong to shoot rabbits just for fun?	Yes	?	No
155b	Do you have difficulty in getting rid of a cold?	Yes	?	No
156a	Has either of your parents made you unhappy by criticizing your personal appearance?	Yes	?	No

157d	Does criticism disturb you greatly?	Yes	?	No
158e	Do you feel embarrassed if you have to ask permission to leave a group of people?	Yes	?	No
159e	Do you think people honestly enjoy the time and effort they put into doing a favor for someone else?	Yes	?	No
160f	Do you know what the world record is for either the 100-yard dash, the pole vault, or the mile race?	Yes	?	No
161b	Are you considerably underweight?	Yes	?	No
162b	Do you frequently come to your meals without really being hungry?	Yes	?	No
163a	Are your parents permanently separated?	Yes	?	No
164d	Are you often in a state of excitement?	Yes	?	No
165c	Do you keep in the background on social occasions?	Yes	?	No
166b	Do you wear eyeglasses?	Yes	?	No
167e	Do you feel that many of the so-called "good deeds" we try to do for people often turn out to do them more harm than good?	Yes	?	No
168a	Is either of your parents very nervous?	Yes	?	No
169d	Does some particular, useless thought keep coming into your mind to bother you?	Yes	?	No
170c	Does it upset you considerably to have a teacher call on you unexpectedly?	Yes	?	No
171b	Do you find it necessary to watch your health carefully?	Yes	?	No
172d	Do you get upset easily?	Yes	?	No
173a	Have you disagreed with your parents about your life work?	Yes	?	No
174c	Do you like to participate in festive gatherings and lively parties?	Yes	?	No
175e	Have you found that you have to "watch your step" around many people or they will take advantage of you?	Yes	?	No
176d	Do you have ups and downs in mood without apparent cause?	Yes	?	No
177e	Do you find it difficult to start a conversation with a stranger?	Yes	?	No
178d	Do you worry too long over humiliating experiences?	Yes	?	No
179b	Have you frequently been absent from school because of illness?	Yes	?	No

180d	Have you ever been extremely afraid of something that you knew could do you no harm?	Yes	?	No
181b	Are you troubled much with constipation?	Yes	?	No
182a	Have you felt that your friends have had a happier home life than you?	Yes	?	No
183f	Do you enjoy preparing food and doing housework?	Yes	?	No
184a	Have your relationships with your mother usually been pleasant?	Yes	?	No
185f	Are you afraid of black wider spiders?	Yes	?	No
186b	Do you have teeth that you know need of dental attention?	Yes	?	No
187c	Do you feel self-conscious when you recite in class?	Yes	?	No
188a	Has either of your parents dominated you too much?	Yes	?	No
189c	Have you often felt superior in some way to those around you?	Yes	?	No
190e	Do you occasionally find it necessary to "tell off" noisy people?	Yes	?	No
191b	Have you had any trouble with your heart or your kidneys or your lungs?	Yes	?	No
192e	Do you agree with the statement: "Most people will change their minds if you offer them enough"?	Yes	?	No
193d	Do ideas often run through your head so that you cannot sleep?	Yes	?	No
194a	Have you often felt that either of your parents did not understand you?	Yes	?	No
195f	Are you interested in interpretive dancing?	Yes	?	No
196d	Does it frighten you to be alone in the dark?	Yes	?	No
197e	Do you agree with the statement that there is no such thing as an absolutely unselfish act?	Yes	?	No
198e	Do you hesitate to volunteer in a class recitation?	Yes	?	No
199b	Have you ever had a skin disease or skin eruption, such as athlete's foot, carbuncles, or boils?	Yes	?	No
200c	Do you hesitate to enter a room by yourself when a group of people are sitting around the room talking together?	Yes	?	No

**ANNEXURE - vii**  
**The Adjustment Inventory Student Form - Scoring Key**

(1) Factor : A (Home Adjustment)		(2) Factor : B (Health Adjustment)		(3) Factor : C (Submissiveness-Self Assertion)	
Yes Answers	No Answers	Yes Answers	No Answers	Yes Answers	No Answers
8	37	2	Nil	17	6
12	111	7		27	11
22	139	14		32	21
26		18		54	24
31		30		56	39
46		33		59	47
49		38		75	66
52		40		82	88
57		45		95	101
63		50		108	119
67		58		124	133
72		65		128	144
80		70		140	149
87		73		141	174
90		79		151	
93		83		165	
96		97		170	
103		102		187	
110		105		197	
121		115		198	
127		122		200	
138		129		Total	70
146		132			
150		142			
156		148			
163		155			
168		161			
173		162			
182		166			
184		171			
188		179			
194		181			
Total	70	186			
		191			
		199			
		Total	70		

(4) Factor : D (Emotionality)		(5) Factor : E (Hostility & Friendliness)		(6) Factor : F (Masculinity-Femininity)	
Yes Answers	No Answers	Yes Answers	No Answers	Yes Answers	No Answers
1	Nil	4	10	69	3
5		15	76	145	9
13		20	159	160	16
28		25			19
41		34			23
53		36			29
60		42			35
64		51			43
71		61			44
74		68			48
78		84			55
81		91			62
86		98			77
89		106			85
94		112			92
100		117			99
104		125			107
109		135			113
114		137			116
118		147			123
120		158			130
126		167			136
131		175			153
134		177			154
143		189			183
152		190			185
157		192			195
164		Total	60	Total	60
169					
172					
176					
178					
180					
193					
196					
Total	70				

**Annexure-viii**  
**THE ADJUSTMENT INVENTORY**  
**(Telugu Version)**

సూచనలు : నీ వ్యక్తిత్వం గురించి ఎక్కువగా తెలుసుకోవాలనే ప్రశ్నలీకున్నదా? నీవు మండు పేజీలలో రాబోయే ప్రశ్నలకు నిజాయతీగా అలోచించి సమాధానము చెప్పినట్లయితే నీ గురించి ఇంకా బాగా అర్థము చేసుకోనే అవకాశమున్నది. సరి అయినవి కానీ, తప్పయినవి కానీ సమాధానములు ఇచ్చట లేవు. ప్రతి ప్రశ్నకు నీ యొక్క సమాధానమును అవును, కాదు (లేదా) ‘?’ అని ఉన్నచోట ‘✓’ గుర్తు ద్వారా తెలియపరచవలెను. ప్రశ్నాపత్రముపై అనవసరమైన గీతలు, వ్రాతలు వ్రాయవద్దు ఈ ప్రశ్నలకు జవాబు వ్రాయుటకు సమయ నిర్దియము లేదు కానీ ష్టోరగా చేయవలెను.

నీవు నీ తల్లిదండ్రులతో కలసి ఉడకపోయినట్లయితే నీవు ఎవరి హళ్ళ ఉంటున్నావో వారిని గురించి కొన్ని ప్రశ్నలకు జవాబు వ్రాయము.

దయచేసి ఈ క్రింది వివరముల నివ్వయము.

పేరు :

తరగతి :

సేకరించి:

పొరకాల పేరు :

అడిసు :

1. డి.	నీకు తరచుగా పగటి కలలు వస్తాయా?	అవును	?	కాదు
2. బి.	నీకు ఇతరుల నుండి సులభముగా జలుబు వస్తుందా?	అవును	?	కాదు
3. ఎఫ్.	నీకు నాటకాలంటే చాల ఇష్టమా?	అవును	?	కాదు
4. ఇ.	చాలమంది సంభాషణలు సర్వసౌధారణముగాను మరియు తెలివి తక్కువైనవి గాను ఉంటాయని నీవు భావిస్తావా?	అవును	?	కాదు
5. డి.	విద్యేనా అనారోగ్యము గురించి డాక్టరు దగ్గరికు వెళ్ళటం అనేది నిన్న భయపెడుతుందా?	అవును	?	కాదు
6. సి.	స్వాగత సభకు గాని, టీ పొర్టీకు గాని హజరంయిన ప్రముఖులను కలుసుకోవాలని అనుకుంటావా?	అవును	?	కాదు
7. బి.	వెలుతురు చూడటానికి నీ కళ్ళు సున్నితముగా ఉన్నట్లు అనుకుంటావా?	అవును	?	కాదు
8. ఎ.	ఇంటి నుండి పోరిపోవాలని నీకు ఎప్పుడైనా గాఢమైన కోరిక కలిగినదా?	అవును	?	కాదు
9. ఎఫ్.	రంగులు అంటే నీకు చాలా ఇష్టమా?	అవును	?	కాదు

10.	ఇంద్రియాల ఉండే ప్రజలందరు కలసి మెలసి ఉండటం	అవును	?	కాదు
	ఎప్పుటికైనా సాధ్యమవుతుందని నీవు అనుకుంటున్నావా?			
11.	పొర్ట్‌కి హజరయిన వ్యక్తులను పరిచయం చేసే బాధ్యత నీవు తీసుకుంటావా?	అవును	?	కాదు
12.	నీ తల్లిదండ్రులు నీ గురించి నిరాశచెందినారని అప్పుడ్పుడు అనుకుంటావా?	అవును	?	కాదు
13.	చెడు విషయాల పట్ల నీవు తరచుగా ఆక్రోంపబడతావా?			
14.	నీకు ఎప్పుడైనా ‘హో’ జ్వరముకాని, ఆస్తమా (ఉభ్యసము) కాని వచ్చినదా?	అవును	?	కాదు
15.	ఈ ప్రపంచములో నమ్మకూడని వాళ్ళ చాల మంది ఉన్నారని నీవు అనుకుంటావా?	అవును	?	కాదు
16.	వాళ్ల రంగు రంగుల బట్టలు ధరించడం నీకు ఇష్టమా?	అవును	?	కాదు
17.	పది మంది కలసి ఉన్నప్పుడు సరియైన అభిప్రాయము పెలిబుచ్చుటలో నీవు తరచుగా ఇభ్యంది పడుతూ వుంటావా?	అవును	?	కాదు
18.	నీకు ఎప్పుడైన స్కూల్‌లో జ్వరముకాని, గవడ బిళ్లలు కాని వచ్చినవా?	అవును	?	కాదు
19.	బాలీరూములో స్నానము కన్నా బావి దగ్గర కాని, పంపు దగ్గర కాని చేసే స్నానము నీకు ఇష్టమా?	అవును	?	కాదు
20.	నిజం చెప్పి ఇభ్యంది పొలపటం కంటే ఆ నిజాన్ని కోంచెం కప్పే పుట్టటం మంచిదని అనుకుంటావా?	అవును	?	కాదు
21.	బక పొర్ట్ డల్గా ఉంటే దాన్ని ఉత్సవపరచడానికి నీవు చోరవ తీసుకుంటావా?	అవును	?	కాదు
22.	మీ తల్లి మీ ఇంటి వ్యవహారాలలో పెత్తనం చేస్తుందా?	అవును	?	కాదు
23.	ఎఫ్. సంఘసేవ చెయ్యటం నీకు ఇష్టమేనా?			
24.	ప్రజలతో కలసి ఉండటం కోసం, సంఘానికి సంబంధించిన సభలను నీవు ఆనందిస్తావా?	అవును	?	కాదు
25.	విక్కువ మంది నీతో స్నేహంగా ఉండరా?	అవును	?	కాదు
26.	నీ తల్లిదండ్రులలో వివరైనా నిన్న తరచుగా అన్యాయంగా విమర్శిస్తూ ఉంటారా?	అవును	?	కాదు
27.	బహిరంగ సమావేశములో అందరూ కూర్చున్న తర్వాత ప్రహేశించటానికి నీకు ఇభ్యందికరముగా ఉంటుందా?	అవును	?	కాదు
28.	ప్రజలతో కలిసినప్పుడు నీకు తరచుగా బంటరికసం అనిపిస్తుందా?	అవును	?	కాదు

29.	ఎఫ్. గృహలంకరణ చేసే వ్యక్తిగా కావాలని నీకు ఇష్టంగా ఉందా ?	అవును	?	కాదు
30.	బి. ఏవిధమైన ప్రమాదములోనైనా నీవు ఎప్పుడైన తీవ్రముగా గాయపడ్డావా?	అవును	?	కాదు
31.	ఎ. మీ ఇంటిలో నీపట్లు నిజమైన ప్రమాభిమానాలు లోపించాయని నీవు అనుకుంటావా?	అవును	?	కాదు
32.	సి. మీ సూక్షలులో తరగతి నుచ్ఛేశించి విద్దినా విషయము నోటిష్టో చెప్పటానికి నీకు ఇచ్చందిగా ఉంటుందా?	అవును	?	కాదు
33.	బి. నీకు తలనొప్పులు చాలా వస్తాయా?	అవును	?	కాదు
34.	ఇ. ఎవరైనా నీకు హని కలిస్తారని నీవు ఎప్పుడైనా అనుకున్నావా?	అవును	?	కాదు
35.	ఎఫ్. నీకు ఎవరికైనా సలహాలు ఇచ్చేవానిగా పని చేయటం ఇష్టమేసా?	అవును	?	కాదు
36.	ఇ. ప్రజలు నిన్న అర్థం చేసుకోలేదని నీవు తరచుగా అనుకుంటావా?	అవును	?	కాదు
37.	ఎ. నీ తండ్రితో నీకు ఉన్న బాంధవ్యం సంతోషకరమైనదేనా?	అవును	?	కాదు
38.	బి. నీ నిదకి ఇచ్చంది కలిగించే శబ్దాలు ఏమి లేనప్పటికిని కొన్ని సార్లు నీవు నిద పట్టకుండ కష్టపడతావా?	అవును	?	కాదు
39.	సి. నీవు రైలులో కాని, బస్సులో కాని ప్రయాణము చేయినప్పుడు తోటి ప్రయాణికులతో సంభాషణ చేస్తావా?	అవును	?	కాదు
40.	బి. రోజులో చివరి సమయంలో నీవు బాగా అలసిపోయినట్లు నీకు తరచుగా అనిపిస్తుందా?	అవును	?	కాదు
41.	డి. భూమిపము, అగ్ని ప్రమాదము గురించి ఆలోచన వచ్చినప్పుడు నీకు భయం వేస్తుందా?	అవును	?	కాదు
42.	ఇ. చాలా సార్లు నీవు “అత్యంత నిజాయతీగా విమాతం దాపరికం లేకుండ ఉండాలి.” అనే దానిని నమ్ముతావా?	అవును	?	కాదు
43.	ఎఫ్. నీవు మనష్యులను గురించికాని, వస్తువులను గురించి గాని వర్ణించేటప్పుడు ‘ఆక్రూషీయమైన’ అనే మాట ఎక్కువగా ఉపయోగిస్తావా?	అవును	?	కాదు
44.	ఎఫ్. రాత్రిపూట దొంగమీ ఇంటిలో ప్రవేశించినట్లు నీకు ఆలోచన వచ్చినప్పుడు నీవు భయపడతావా?	అవును	?	కాదు
45.	బి. ఈ మధ్యకాలంలో నీ శరీర బరువు ఏమైనా తగ్గినదా?	అవును	?	కాదు
46.	ఎ. నీ కోరిక సరియైనది అవునో కాదో ఆలోచించకుండ నీ కల్లికాని, కండికాని వాళ్ళమాట్ అమలు జరగాలని పట్టి పట్టురా?	అవును	?	కాదు

47. సి.	ఇతరులను సహాయం అడగటం తేలిక అని నీవు అనుకుంటావా?			
48. ఎప్ప.	ఇల్లు సర్ఫ్ట్ కోవటం గురించి లేదా స్త్రీల గృహ సంబంధమైన వార్తా ప్రతికలు వంటివి నీవు తరచుగా చదువుతూ ఉంటావా?	అవును	?	కాదు
49. ఎ.	నీ కుటుంబములో దగ్గరివారి అనారోగ్యముకాని, మరణముకాని నీవు విచారముగా ఉండటానికి కారణమవుతుందా?	అవును	?	కాదు
50. బి.	నీకు తరచుగా తెరలు తెరలుగా తలశిరగటం వస్తుందా?	అవును	?	కాదు
51. ఇ.	నీవు ప్రజలను ఎక్కువగా విమర్శిస్తున్నావని వారు ఎప్పుడైనా నిన్న నిందించారా?	అవును	?	కాదు
52. ఎ.	డబ్బులేక పోవటం వలన మీ ఇంటిలో ఉండటం నీకు విచారం కలిగించిందా?	అవును	?	కాదు
53. డి.	చిన్న విషయానికి కూడ నీకు కన్నీరు వస్తాయా?	అవును	?	కాదు
54. సి.	సిగ్గువలన నీవు ఇచ్చంది పడుతున్నావా?	అవును	?	కాదు
55. ఎఫ్.	పెద్ద అగ్ని ప్రమాదం నీకు ఎక్కువ భయం కలిగిస్తుందా?			
56. సి.	నీకు ఎక్కువగా పరిచయం లేని వారి దగ్గరి నుండి నీకు ఏదైనా అవసరము కలిగినప్పుడు అతనిని కాని లేదా ఆమెను కాని నీవు స్వయంగా వెళ్లి అడగటం కన్నా చేటీ కాని లేదా ఉత్తరముకాని వ్రాస్తావా?	అవును	?	కాదు
57. ఎ.	నీ ప్రవర్తన గురించి నీ తల్లిదండ్రులలో ఎవరైనా నిన్న తరచుగా తప్పుపడుతుంటారా?	అవును	?	కాదు
58. బి.	నీకు ఎప్పుడైనా ఆపరేషను జరిగినదా?	అవును	?	కాదు
59. సి.	పది మంది కలసి ఉన్నప్పుడు చర్చ మొదలు పెట్టివలసి వచ్చినప్పుడు నీవు ఇచ్చంది పడతావా?	అవును	?	కాదు
60. డి.	పొమును చూసినప్పుడు నీవు భయపడతావా?	అవును	?	కాదు
61. ఇ.	ప్రవంచములో “భయంకరమైన పానీయములు” ఉన్నాయని నీవు అప్పుడప్పుడు అనుకుంటావా?	అవును	?	కాదు
62. ఎఫ్.	పిచ్చివాళ్ళంటీ నీకు భయమా?			
63. ఎ.	నీతో కలసి తిరిగే స్నేహితులు గురించి నీ తల్లిదండ్రులు తరచుగా అభ్యంతరము చెప్పతారా?	అవును	?	కాదు
64. డి.	నీవు ఏ పొరపాటు చేయనప్పటికి నీకు సంబంధించిన విషయాలు తప్పులు జరుగుతుంటాయా?	అవును	?	కాదు
65. బి.	నీకు తరచుగా జలుబు చేస్తుందా?	అవును	?	కాదు
		అవును	?	కాదు

66. సి.	ఇతరులకు సలహాలు ఇచ్చి వారిని నీవు చెప్పినట్లు చేయించగలవా?	అవును	?	కాదు
67. ఎ.	కుటుంబాన్ని పోషించేటందుకు నీ తండ్రి చేయు పని నీకు ఇబ్బందికరంగా ఉంటుందా?	అవును	?	కాదు
68. ఇ.	నీ స్నేహితులతో తరచుగా ‘మోసగింపబడిన’ అనుభవం నీకు ఉందా?	అవును	?	కాదు
69. ఎఫ్.	న్యూస్ హేపరులో క్రీడల విభాగం నీవు చూస్తావా?			
70. బి.	నీకు గొంతులో కాయలు కాని, కంఠమునకు సంబంధించిన వ్యాధి కాని వచ్చినదా?	అవును	?	కాదు
71. డి.	మెరుపులు అంట నీకు భయమా?	అవును	?	కాదు
72. ఎ.	నీ తల్లిదండ్రులకు ఎవరికైనా త్వరగా చికాకు కలుగుతుందా?			
73. బి.	నీకు ఘృజ్వరము వచ్చినదా?	అవును	?	కాదు
74. డి.	సూక్షులులో తక్కువ మార్పులు వచ్చినందుకు నీవు తరచుగా క్షాంగిపోతూ ఉంటావా?	అవును	?	కాదు
75. సి.	అప్పుడే పరిచయమైన వ్యక్తితో సంభాషణ మొదలు పెట్టడం నీకు కష్టంగా ఉంటుందా?	అవును	?	కాదు
76. ఇ.	సాధారణంగా స్త్రీలు నీతో చక్కగా ప్రవర్తిస్తారని వారిని నమ్మచ్చునని నీవు అనుకుంటావా?	అవును	?	కాదు
77. ఎఫ్.	ఎవరైన చెడు మాటలు ఉపయోగిస్తే నీకు వినటానికి విసుగుగా ఉంటుందా?	అవును	?	కాదు
78. డి.	ఎవరైన నిన్నులో బరచుకొని నీ ఇష్టమునకు వ్యక్తిరేకముగ నీతో పని చేయస్తున్నారని నీకు ఎప్పుడైన అనిపించిందా?	అవును	?	కాదు
79. బి.	గతపదిసంవత్సరములలో నీకు గమనించదగిన అనారోగ్యము ఏమైనా వచ్చినదా?	అవును	?	కాదు
80. ఎ.	ఇంట్లో ఉనుల విషయమైనీకు తరచుగా నీ తల్లిదండ్రులలో ఎవరితోనైనా గొడవలు జరుగుతాయా?	అవును	?	కాదు
81. డి.	ఇతరులు అనుభవించే ఆనందాన్ని గురించి నీవు అప్పుడప్పుడూ అసూయపడుతుంటావా?	అవును	?	కాదు
82. సి.	క్లాసులో ఏదైన ప్రశ్న అడిగినప్పుడు జవాబు నీకు తెలిసినప్పుడికినీ క్లాసులో చెప్పటానికి నీవు తరచుగా భయపడుతూ ఉంటావా?	అవును	?	కాదు
83. బి.	కడుపులోకాని, ప్రేగులలో కాని గ్యాసు ఏర్పడుట వలన నీకు తరచుగా అసీకర్యం కలుగుతుందా?	అవును	?	కాదు

84. ఇ.	కపటములేని, మూసగింపదగిన వ్యక్తి నీకు ఎక్కువగ చికాకు కలిగిస్తోరా?	అవును	?	కాదు
85. ఎఫ్.	పొట్ట మరియు ప్రేగులు అనే మాటలు అంటే నీకు అయిష్టమా?	అవును	?	కాదు
86. డి.	ఐత్తెన ప్రదేశములో ఉన్నప్పుడు అక్కడ నుండి దూకుతానేమానని నీకు ఎప్పుడైన భయం వేసిందా?	అవును	?	కాదు
87. ఎ.	నీ దగ్గర బంధువులలో కుటుంబ కలహములు తరచుగా వస్తూ ఉంటాయా?	అవును	?	కాదు
88. సి.	స్త్రీ పురుష భేదం లేకుండ ఎవరితోనైన స్నేహ సంబంధాలు కలిగించు కోవటం సులభము అని అనుకుంటున్నావా?	అవును	?	కాదు
89. డి.	నీవు త్వరగా నిరాశచెందుతావా?	అవును	?	కాదు
90. ఎ.	నీవు నీ సిందరీ సిందరులతో తరచుగా కలహం పెట్టుకుంటావా?	అవును	?	కాదు
91. ఇ.	నీకు గాఢముగా అయిష్టత కలిగించిన వారిని చాల మందిని కలుసుకున్నావా?	అవును	?	కాదు
92. ఎఫ్.	ఎవైన పొగాకు నమిలి ఉమ్మివేసే వారిని చూస్తే నీకు అసహ్యం కలుగుతుందా?	అవును	?	కాదు
93. ఎ.	నీ తల్లిదండ్రులు ఎవైన చేసిన పనులు నీకు ఎప్పుడైన భయం కలిగించినవా?	అవును	?	కాదు
94. డి.	నీవు చేసిన పనులకు తరచుగా విచారపడతావా?	అవును	?	కాదు
95. సి.	బక విందులో నీకు ఏదైన కావలసివచ్చినప్పుడు దానిని అడగికుండానే సరిపెట్టుకుంటావా?	అవును	?	కాదు
96. ఎ.	నీవు అనుభవయోగ్యమైన వ్యక్తి అయినట్లు నీ తల్లిదండ్రులు గుర్తించకుండ నిన్న ఇంకా బాల్యయులో ఉన్నట్లుగానే చూస్తున్నారని నీవు అనుకుంటావా?	అవును	?	కాదు
97. బి.	నీకు కంటి నొప్పి ఉన్నదా?	అవును	?	కాదు
98. ఇ.	తప్పు, చేస్తేపట్టబడి శిక్షింపబడునని భయము లేకపోయినట్లయితే చాల మంది మనుష్యులు వక్కబుద్ధికలవారు అవుతారని నీవు అనుకుంటావా?	అవును	?	కాదు
99. ఎఫ్.	గాఢమైన చెమట వాసన నీకు అసహ్యము కలిగిస్తుందా?	అవును	?	కాదు
100. డి.	నీ ఆలోచనలను ఇతరులు తెలుసుకుంటున్నారు అనే భావన నిన్న పీడిస్తుందా?	అవును	?	కాదు
101. సి.	బహిరంగ సమావేశములకు చాలా సార్లు హజరవుతావా?	అవును	?	కాదు
102. బి.	ఉదయము నిద్రలేచినప్పుడు నీవు అలసినట్లు నీకు అనిపిస్తుందా?	అవును	?	కాదు

103. ఎ.	తల్లిదండ్రులు అసాధారణముగనీ పట్ల కలినముగా ఉంటారని నీవు అనుకుంటావా?	అవును	?	కాదు
104. డి.నీకు ఊరికే కోపమొస్తుందా?		అవును	?	కాదు
105. బి.	తరచుగా వైద్యం చేయించుకోవటం నీకు అవసరమా	అవును	?	కాదు
106. ఇ.	కొంత మంది నీతో టివాట్చు చేసిన “మూగస్తుగలను” తరచుగా గుర్తిస్తావా?	అవును	?	కాదు
107. ఎఫ్.	త్రాగుబోతు అంటే నీకు అసహ్యమా?	అవును	?	కాదు
108. సి.	ప్రజలతో మాట్లాడటం నీకు ఇబ్బందిగా ఉంటుందా?			
109. డి.	నీకు తరచుగా దుఃక్తరంగా ఉంటుందా?			
110. ఎ.	నీ తల్లిదండ్రులలో ఎవరికైన నీకు నష్టని అలవాట్లు ఏమైనా ఉన్నాయా?	అవును	?	కాదు
111. ఎ.	మీ ఇంటిలో సాధారణ అవసరాలు అన్నియు ఎల్లప్పుడు అందుబాటులో ఉంటాయా?	అవును	?	కాదు
112. ఇ.	చాలా వంది వంనుష్యులు అవకాశమువస్తే నిన్ను ఉపయోగించుకోవాలని చూస్తారని నీవు అనుకుంటావా?	అవును	?	కాదు
113. యఫ్.దుస్తులు ధరించుటలో క్రొత్తపోకడలు గురించి చదవటం నీకు ఇష్టమేనా?	అవును	?	కాదు	
114. డి.	నీవు తక్కువ వాడిననే భావంతో బాధపడుతున్నావా?	అవును	?	కాదు
115. బి.	నీవు అలసినట్లుగా చాలాసార్లు అనుకుంటావా?	అవును	?	కాదు
116. యఫ్.నీ శరీరధాయ మరియు నీ చేతులు గురించి ప్రభ్రతీసుకోనుటలో చాలినంత సమయం వినియోగించడం నీకు ఇష్టమేనా?	అవును	?	కాదు	
117. ఇ.	జీవితంలో ముందుకు సాగిపోవాలంటే ముందు నీ గురించి నీవు చూసుకోవాలి అనేది నిజమని అనుకుంటావా?	అవును	?	కాదు
118. డి.	నీవు ఉద్దేశానికి లోనయ్యే వ్యక్తిని అని అనుకుంటావా?	అవును	?	కాదు
119. సి.	ఇతరులతో కలసి స్వత్యం చేయటం నీకు ఇష్టమేనా?	అవును	?	కాదు
120. డి.	నీవు కనిపించే తీరును బట్టి నీవు ఆత్మ చైతన్యం కలవాడినని తరచుగా అనుకుంటావా?	అవును	?	కాదు
121. ఎ.	నీవు తండ్రికంటే తల్లిని ఎక్కువగా ప్రేమిస్తావా?	అవును	?	కాదు
122. బి.	నీవు అబ్బముకో బాధపడుతూ ఉంటావా?	అవును	?	కాదు
123. యఫ్.పుష్టిలు అమర్ధటం నీకు ఇష్టమేనా?				
124. సి.	“నీ పెనుక” నీ గురించి జనం మాట్లాడుకుంటారని నీకు ఎప్పుడైన ఆనిపించిందా?	అవును	?	కాదు

125. ఇ.	మన సాంఘిక ఆచారాలు మరియు నీతి సూటాలు చాల వరకు “మూగపోయినవే” నని నీవు అనుకుంటావా?	అవును	?	కాదు
126. ఔ.	నీవు తేలికగా సిగ్గుపడతావా?	అవును	?	కాదు
127. ఎ.	జల్లు ప్రశాంతంగా ఉండటానికి నీవు తరచుగా మాట్లాడటం మాని వేయడం కాని, జంటి నుండి బయటకు పోవటం కాని జరుగుతూ ఉంటుందా?	అవును	?	కాదు
128. సి.	నీకు అంతగా పరిచయం లేసి, నీవు అభిమానించే వ్యక్తుల సమక్షంలో నీవు మనసుప్రార్థిగా ఆనందంగా ఉంటావా?	అవును	?	కాదు
129. బి.	నీకు అప్పుడప్పుడు తీవ్రమైన తలనొప్పి వస్తుందా?	అవును	?	కాదు
130. యఫ్.	ఆడవాళ్ళు ఆడవాళ్ళతో, మగవాళ్ళు మగవాళ్ళతో కలసి ఆడుకోవడం వలన నీవు అనందాన్ని పొందుతావా?	అవును	?	కాదు
131. ఔ.	విషయములన్ని నిజము కావు అనే భావముతో నీవు బాధపడుతుంటావా?	అవును	?	కాదు
132. బి.	నీకు తరచుగా వికారముకాని, వాంతులు కాని, అజీర్ణము కాని వస్తాయా?	అవును	?	కాదు
133. సి.	సాంఘిక కార్బ్రూక్రమాలలో నీవు అప్పుడప్పుడు నాయకత్వం వహిస్తావా?	అవును	?	కాదు
134. ఔ.	నీవు చిన్న విషయాలకే బాధపడుతూ ఉంటావా?	అవును	?	కాదు
135. ఇ.	నీవు కలుసుకునే వ్యక్తులలో చాలా మంది అత్యధికముగా అశపటుతూ ఉంటారని అనుకుంటావా?	అవును	?	కాదు
136. యఫ్.	ఆబరణాలు ధరించటం నీకు ఇష్టమేనా?	అవును	?	కాదు
137. ఇ.	ఎవరిసైనా కలవటం ఇష్టం లేనప్పుడు నీవు వెళ్ళేదారి నుండి తప్పు కుంటావా?	అవును	?	కాదు
138. ఎ.	నీ కుటుంబ సభ్యులవట్ల అప్పుడప్పుడు నీకు విరుద్ధమైన ప్రేమ మరియు అసహ్యము అయిన భావము కలుగుతుందా?	అవును	?	కాదు
139. ఎ.	నీ తండ్రి నీవు అనుకునే వ్యక్తిత్వం కలిగినవాడేనా?	అవును	?	కాదు
140. సి.	ఇతరుల తప్పులను వారికి ఎత్తి చూపటం మంచి ఆలోచన అని నీవు అనుకుంటావా?	అవును	?	కాదు
141. సి.	నీవు విద్యైనా సమావేశానికి ఆలశ్యముగా వెళ్ళునప్పుడు, ముందు సీటులోకి వెళ్ళి కూర్చోవటం కన్నా నులుచోవడం కాని, వెళ్ళిపోవడంకాని చేస్తావా?	అవును	?	కాదు
142. బి.	నీ బాల్యంలో ఎక్కువకాలం నీవు అనారోగ్యంగా ఉన్నావా?	అవును	?	కాదు

143. డి.	జరగడానికి అవకాశమున్న దురద్యష్టాలను గురించి నీవు విచారపడతావా?	అవును	?	కాదు
144. సి.	నీవు స్నేహితులతో త్వరగా కలిసిపోతావా?	అవును	?	కాదు
145. యఫ్.	ఆకాశంలో ఎగిరేవిమానములు మరియు యుద్ధ నౌకల యొక్క నిర్మాణం గురించి చదవటం నీకు ఇష్టమేనా?	అవును	?	కాదు
146. ఎ.	నీవు 10, 15 సంవత్సరముల మధ్య వయస్సులో ఉన్నప్పుడు నీ తల్లిదండ్రులు నిన్ను తరచుగా శిక్షించేవారా?	అవును	?	కాదు
147. ఇ.	నీకు స్నేహితుడు అనబడే వ్యక్తి నిన్ను వంచించాడా?	అవును	?	కాదు
148. బి.	నీవు ముక్కుతో శాఖపేల్చుకోవడంలో తరచుగా ఇచ్చంది పడుతుంటావా?	అవును	?	కాదు
149. సి.	తరచుగా పార్టీలో ప్రధాన ఆకర్షణ నీపై ఉంటుందా?	అవును	?	కాదు
150. ఎ.	నీ తల్లిదండ్రులలో ఎవరికైనా ఊరికే కోపమొస్తుందా?	అవును	?	కాదు
151. సి.	చాలా మంది సాధారణ పరిచితుల కంటే కొద్దిమంది ప్రాణ స్నేహితులు కలిగి ఉండటం మంచిదని అనుకుంటావా?	అవును	?	కాదు
152. డి.	నీవు వీధిలో వెటున్నప్పుడు ప్రజలు నిన్ను గమనిస్తున్నారు అనే ఆలోచన నీకుఇచ్చంది కలిగిస్తుందా?	అవును	?	కాదు
153. యఫ్.	కుట్టు, అల్లీకలు వంటి చేతి పనులు అంటే నీకు ఇష్టమేనా?	అవును	?	కాదు
154. యఫ్.	కేవలం వినోదం కోసం కుందేళ్ళను గురి చూసి చంపటం తప్పు అని నీవు అనుకుంటావా?	అవును	?	కాదు
155. బి.	జలుబు తగ్గించుకోవడం నీకు ఇచ్చందిగా ఉంటుందా?	అవును	?	కాదు
156. ఎ.	నీ ఆకారాన్ని విమర్శించటం ద్వారా నీ తల్లిదండ్రులు నీకు బాధ కలిగించారా?	అవును	?	కాదు
157. డి.	విమర్శ వలన నీవు విక్కువగా అందోళన చెందుతావా?	అవును	?	కాదు
158. ఇ.	జనసమూహము నుండి పెళ్ళటానికి అనుమతి అడగటానికి నీవు ఇచ్చంది పడతావా?	అవును	?	కాదు
159. ఇ.	ప్రజలు ఇతరుల సహాయం కోసం ఖర్చుచేసే కాలాన్ని మరియు ప్రయని నిజంగా ఆసందిస్తారు అని నీవు అనుకుంటావా?	అవును	?	కాదు
160. ఎఫ్.	కుస్త్ర పోటీల వంటి ఆటలు అంటే నీకు ఇష్టమేనా?	అవును	?	కాదు
161. బి.	నీ వయసు వారి కంటే నీ బరువు చాల తక్కువా?	అవును	?	కాదు
162. బి.	నిజముగా ఆకలి లేకపోయినప్పటికేని నీవు తరచుగా భోజనానికి వస్తావా?	అవును	?	కాదు
163. ఎ.	నీ తల్లిదండ్రులు శాస్త్రశాస్త్రాలు విడిపోయారా?	అవును	?	కాదు

164. డి.	నీవు తరచుగా ఉద్దేకానికి లోనవుతూ ఉంటావా?	అవును	?	కాదు
165. సి	సాంఘికపరమైన సందర్భాలలో నీవు తెరవురుగున ఉంటావా?	అవును	?	కాదు
166. బి.	నీవు కళ్ళజోడు ధరిస్తావా?	అవును	?	కాదు
167. ఇ.	ప్రజలకు 'మంచి పనులు' అనుకొని మనము చేసినవి తరచుగా వారికి ఉపకారవుకన్నా ఎక్కువగా హని కలిగిస్తాయని నీవు అనుకుంటావా?	అవును	?	కాదు
168. ఎ.	నీ తల్లిదండ్రులలో ఎవరైనా సులభంగా ఉద్దేకం చెందుతారా?	అవును	?	కాదు
169. డి.	ఏదైనా ప్రత్యేకమైన పనికి మాలిన ఆలోచన తరచుగా నీ మనస్సులోకి వచ్చి నిన్ను చికాకు పరుస్తుందా?	అవును	?	కాదు
170. సి.	అనుకోకుండ మీ టీచరు నిన్ను పెలిచినప్పుడు నీవు కలత చెందుతావా?	అవును	?	కాదు
171. బి.	నీ అలోగ్యాన్ని జాగ్రత్తగా కాపాడుకోవటం అవసరమని నీవు అనుకుంటావా?	అవును	?	కాదు
172. డి.	నీవు తేలికగా (ఊరికే) కలత చెందుతావా?	అవును	?	కాదు
173. ఎ.	నీ జీవితవునకు సంబంధించిన పని గురించి నీ తల్లిదండ్రులతో విభేదము వచ్చినదా?	అవును	?	కాదు
174. సి.	పండుగ సందర్భంగా గుమికూడిన జన సమూహములోను వురియు ఉల్లాసమైన (సంతోషమైన) విందులోను పాల్గొనుట నీకు ఇష్టమేనా?	అవును	?	కాదు
175. ఇ.	చాలామంది ప్రజలతో కలసి ఉన్నప్పుడు నీవు జాగ్రత్తగా లేసటటయే వాళ్ళ నిన్ను బాగా ఉపయోగించుకుంటారని నీవు తెలుసుకున్నావా?	అవును	?	కాదు
176. డి.	సరియైన కారణము లేకుండానే నీ ఆలోచనా ధోరణి పొచ్చుతగ్గులకు లోనవుతుందా?	అవును	?	కాదు
177. ఇ.	క్రొత్త వ్యక్తితో సంభాషణ మొదలు పెట్టడానికి నీవు ఇచ్చింది పడతావా?	అవును	?	కాదు
178. డి.	అవమానకరమైన సంఘటన (అనుభవము) కలిగినప్పుడు నీవు చాలాకాలం బాధపడతావా?	అవును	?	కాదు
179. బి.	అనారోగ్యం కారణంగా నీవు తరచుగా సూక్షలు మానేస్తూ ఉంటావా?	అవును	?	కాదు

180.	డి.	నీకు అపకారము జరగదని తెలిసినప్పటికిని విద్దినా విషయము గురించి నీవు ఎక్కువగా భయపడ్డావా ?	అవును	?	కాదు
181.	బి.	మలబద్ధకము వలన నీవు ఎక్కువగా బాధపడుతూ ఉంటావా ?	అవును	?	కాదు
182.	వి.	నీవు నీ ఇంటిలో పొందే సంతోషంకన్నానీ స్నేహితులు వారి ఇళ్ళలో ఎక్కువ సంతోషంగా ఉంటున్నారని నీవు అనుకుంటున్నావా ?	అవును	?	కాదు
183.	ఎఫ్.	ఇంటిపనులు చే యటం మరియు వంట చే యటం నీకు సంతోషపెంచేనా ?	అవును	?	కాదు
184.	వి.	నీ తల్లితో నీకు ఉన్న అనుబంధం నీకు సంతోషం కలిగిస్తుందా ?	అవును	?	కాదు
185.	ఎఫ్.	నల్లగాలెపురుగు (పెద్దది) అంటే నీవు భయపడతావా ?	అవును	?	కాదు
186.	బి.	పంటి వైద్యం చేయించుకోవాల్సిన పశ్చ నీకు ఉన్నాయా ?	అవును	?	కాదు
187.	సి.	నీవు క్లాసులో చదివేటప్పుడు అందరూ గమనిస్తున్నారని నీవు అనుకుంటావా ?	అవును	?	కాదు
188.	వి.	నీ తల్లిదండ్రులలో ఎవరైనా నీ మీద ఎక్కువగా పెత్తనం చేకారా ?	అవును	?	కాదు
189.	జి.	నీ చుట్టూ ఉన్నవారికంటి విద్దిన విషయంలో అదికుడననే భావం నీకు తరచుగా వస్తూ ఉంటుందా ?	అవును	?	కాదు
190.	జి.	పెద్దగా సందడిచేసే మనుష్యులను అప్పుడప్పుడు దూరంగా ఉంచటం అవసరమని నీవు అనుకుంటావా ?	అవును	?	కాదు
191.	బి.	నీకు మూత్రపీండాలకు, ఊపిరితిత్తులకు సంబంధించిన వ్యాధులు దిమ్మెనా ఉన్నాయా ?	అవును	?	కాదు
192.	జి.	“నీవు చాలినంత ఇచ్చినట్లయితే చాలమంది వ్యక్తులు వారి మనస్సు మార్పుకుంటారు” అనే సంగతి నీవు ఒప్పుకుంటావా ?	అవును	?	కాదు
193.	డి.	నీకు నిద్ర పట్టనంతగా నీ తలలో ఆలోచనలు మొదులుతూ ఉంటాయా ?	అవును	?	కాదు
194.	వి.	నీ తల్లిదండ్రులలో ఎవరైనా నిన్న అర్థం చేసుకోలేదని నీవు తరచుగా అనుకుంటావా ?	45889	?	కాదు
195.	ఎఫ్.	నాట్యం అంటే నీకు షష్ఠిపెంచేనా ?	అవును	?	కాదు
196.	డి.	చీకబీలో ఒంటరిగా ఉంటే నీకు భయం వేస్తుందా ?	అవును	?	కాదు
197.	సి.	ప్రజలు ఏమాతం స్వాధం లేకుండ ఏ పనీ చెయ్యలేరనే విషయం నీవు అంగీకరిస్తావా ?	అవును	?	కాదు
198.	సి.	తరగతిలో నీ అంతట నీవు పొరం అప్పచెప్పుటానికి వెనుకంజ వేస్తావా ?	అవును	?	కాదు
199.	బి.	ఆటలలో పొదానికి గాయాలు, బోభులు (పుండ్లు), కాలిన బోభులు వంటి చర్చావ్యాధులు కాని, దురదలు కాని నీకు ఎప్పుడైనా వచ్చాయా ?	అవును	?	కాదు
200.	సి.	గది చుట్టూ మనుష్యులు కూర్చుని మాట్లాడుకుంటున్నప్పుడు నీ అంతట నీవు గదిలోనికి ప్రవేశించటానికి సంకోచిస్తావా ?	అవును	?	కాదు



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This is to certify that Prof./Dr./Shri/Smt. M.V.L. SADHANI

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has presented a Paper/Poster in Section of Committee on  
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